

FORM 7 WITHDRAWAL FORM



Post this form to **ANZ Investments, Freepost 324, PO Box 7149, Wellesley Street, Auckland 1141.**

1. THIS WITHDRAWAL REQUEST RELATES TO MY/OUR INVESTMENT IN THE FOLLOWING (PLEASE TICK ONE):

- ANZ Investment Funds OneAnswer Multi-Asset-Class Funds

2. INVESTOR INFORMATION

First name(s)	Surname
First name(s)	Surname

or Company/Trust/Partnership/Estate name

ANZ customer (or investor) number

Contact phone

Email

Country of birth

3. TAX INFORMATION

(Visit anz.co.nz/pirupdate for help)

Name of taxpayer

Taxpayer's IRD number

Taxpayer's prescribed investor rate 0% 10.5% 17.5% 28%

If any of the tax payment details differ from what we currently have on record, they will be updated based on the information on this form before processing this withdrawal.

If you haven't notified both your IRD number and prescribed investor rate, you will be taxed on income allocated to you at the default rate of 28%.

4. WITHDRAWAL INFORMATION

I/We request (please tick one):

- a withdrawal of my/our **full** balance (please refer to section 5)
- a **partial** withdrawal of \$ (minimum \$500)
- a **regular** withdrawal of \$ (minimum \$100)

Frequency for regular withdrawal (please tick one of the available choices):

- monthly quarterly six-monthly annually

Start date

I/We request that the partial or regular withdrawal as indicated above be deducted from my/our fund/s as follows:

Conservative Fund	\$ <input type="text"/>
Conservative Balanced Fund	\$ <input type="text"/>
Balanced Fund	\$ <input type="text"/>
Balanced Growth Fund	\$ <input type="text"/>
Growth Fund	\$ <input type="text"/>
TOTAL	\$ <input type="text"/>



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5. PAYMENT INFORMATION

Please note the proceeds of this withdrawal can only be paid to the investor's New Zealand bank account; we are not able to make payments to third parties.

Name of bank account holder

(leave blank if a bank-encoded deposit slip is attached)

Payment account

Bank	Branch	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. IDENTIFICATION

If you believe you have already given us proof of your identity and address, continue to section 7. If not, as part of your withdrawal request, you must provide certified copies of your ID and proof of address. All photocopied documents must be verified or certified by an authorised person, such as a Justice of the Peace, before sending them to us.

If we need to ask you for further information, this will delay the processing of your withdrawal request.

Please provide us with either:

- a certified/verified copy of your current passport (page showing your name, date of birth, photograph and signature), or
- a certified/verified copy of your current driver licence showing your name, signature and expiry date and a bank account statement issued **to you** by a New Zealand registered bank, or
- a certified/verified copy of your current firearms licence.

AND one of the following:

- a certified/verified copy of your bank statement (which can't be more than three months old), or
- a certified/verified copy of your power bill (which can't be more than three months old), or
- a certified/verified copy of your home phone bill (which can't be more than three months old), or
- a certified/verified copy of your Inland Revenue statement (which can't be more than three months old).

Who can certify your documents?

The following people can certify photocopies of original documents as true and correct copies:

- Notary Public
- Justice of the Peace
- Member of the Police
- New Zealand lawyer
- New Zealand Chartered Accountant
- A person who has legal authority to take statutory declarations (or equivalent) in New Zealand.

Please note that the certifier must be at least 16 years of age and cannot be:

- a person involved in the transaction requiring the certification
- related to you
- your spouse or partner
- a person who lives at the same address as you.

Here is an example of what your ID should look like when it's been certified correctly.

Remember to include your certified/verified ID and proof of address with your withdrawal request. Any information missing from your withdrawal request will cause delays.



I, James Black

hereby certify that this is a true and correct copy of the original document which I have sighted, and it represents a true likeness of the individual.

Dated the 15th day of January 2017

Enrolled barrister and solicitor of the High Court of New Zealand

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7. SIGNATURE(S)

I/We request to withdraw my/our investment as indicated on this form.

Joint investments – all investors must sign

Trusts – all trustees must sign

Partnerships – all partners must sign

Companies – at least one director or one authorised signatory must sign

If signed under power of attorney, the attorney confirms that he/she has not received notice of revocation of that power.

Name

Signature

Date

Name

Signature

Date