



Withdrawal Form

Forsyth Barr Investment Funds

If you have any questions regarding this form, please contact your Investment Adviser on 0800 367 227.

Applicant Details

Company/Incorporated Entity, Trust, Partnership/Unincorporated Entity, Deceased Estate Name:

Account Number:

Individual or joint applicants: Also Directors for Company or Incorporated Entity Applicants, Trustees for Trust Applicants, Partners/ Authorised Signatories for Partnerships or Unincorporated Entity Applicants, and Executors for Deceased Estates Applicants. (Please enter the primary contact person first)

Individual or Joint Applicants

Mr Ms Mrs Miss Dr Other

Full Name:

Mr Ms Mrs Miss Dr Other

Full Name:

Mr Ms Mrs Miss Dr Other

Full Name:

Mr Ms Mrs Miss Dr Other

Full Name:

Lump Sum Withdrawal Details

I wish to make a withdrawal from the following fund(s)

Please note: The withdrawal value shall be the unit value on the valuation day of the relevant Fund. You may need to pay PIE tax when your withdrawal is processed and sell spreads may apply. For each Fund, payment is generally processed on the next valuation day following receipt of a withdrawal notice by the Manager. The Manager may defer payment for up to five days where it is necessary to realise investments to meet the withdrawal proceeds.

Fund	Full withdrawal (please tick)	Withdrawal amount:
<input type="radio"/> Forsyth Barr New Zealand Equities Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Australian Equities Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Listed Property Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Global Equities Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr New Zealand Fixed Interest Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Income Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Balanced Fund:	<input type="radio"/>	\$ <input type="text"/>
<input type="radio"/> Forsyth Barr Growth Fund:	<input type="radio"/>	\$ <input type="text"/>

Please turn over

Please note: The withdrawal value shall be the unit value on the valuation day of the relevant Fund. You may need to pay PIE tax when your withdrawal is processed and sell spreads may apply.

For each Fund, payment is generally processed on the next valuation day following receipt of a withdrawal notice by the Manager. The Manager may defer payment for up to five days where it is necessary to realise investments to meet the withdrawal proceeds.

Regular Withdrawal Details

Withdrawal amount:

<input type="radio"/> Forsyth Barr New Zealand Equities Fund:	\$
<input type="radio"/> Forsyth Barr Australian Equities Fund:	\$
<input type="radio"/> Forsyth Barr Listed Property Fund:	\$
<input type="radio"/> Forsyth Barr Global Equities Fund:	\$
<input type="radio"/> Forsyth Barr New Zealand Fixed Interest Fund:	\$
<input type="radio"/> Forsyth Barr Income Fund:	\$
<input type="radio"/> Forsyth Barr Balanced Fund:	\$
<input type="radio"/> Forsyth Barr Growth Fund:	\$

Amount and frequency

Amount of regular withdrawal: \$

Date of first withdrawal:
DAY MONTH YEAR

Withdrawal frequency: Monthly Quarterly

Account to be credited

I wish my withdrawal to be deposited into my Forsyth Barr Cash Management Account (not available for FB_FUNDS)

I wish my withdrawal to be deposited into my nominated bank account

Nominated Bank Account: the bank account indicated on your Application Form.

Bank Account Details

Account Name: Bank:

Account Number:
BANK BRANCH ACCOUNT NUMBER SUFFIX

Bank Account Details: You may alter your bank account details for receiving distributions by contacting us in writing and giving us at least 2 business days notice.

Agreement and Signature

Name: <input type="text"/>	Name: <input type="text"/>
Signature: <input type="text"/>	Signature: <input type="text"/>
Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DAY MONTH YEAR</small>	Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DAY MONTH YEAR</small>
Name: <input type="text"/>	Name: <input type="text"/>
Signature: <input type="text"/>	Signature: <input type="text"/>
Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DAY MONTH YEAR</small>	Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DAY MONTH YEAR</small>