

Fisher Funds Investment Funds Transfer Form

Use this form to transfer your units in the Fisher Funds Investment Funds to another person. If you have questions or need assistance, please contact us on **0508 347 437**.

Please scan and email the completed form and supporting documents to enquiries@fisherfunds.co.nz or return by post to:

Fisher Funds Wealth Limited
Private Bag 93502
Takapuna
Auckland 0740

Section 1 – Transferor investor details (complete all applicable fields)

Client number (if known)

Title	First name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

IRD number	Contact phone
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> (<input type="text"/>) <input type="text"/>

Email address

Address

Street no.	Street name	Suburb	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
City	Postcode	Country	PO Box (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 2 – Units to be transferred

Please complete the table on the next page to transfer your units in a Fund in your investment account(s).

If you have rebalancing turned on we will rebalance any remaining units in the Fund(s) in your investment account back to your investment mandate.

If you don't have rebalancing turned on, please tick if you want us to rebalance your investment account after the transfer. This will be a one-off rebalance. In either case, in rare circumstances transaction costs (Buy/Sell spreads) may apply.

Yes, please rebalance my investment account(s) following the transfer of units as a one-off rebalancing.

Section 2 – Units to be transferred (continued)

Transferor Investment Account Details					Transferee Investment Account Details	
Investment account number	Investment account name	Fund Name	Number of Units*	All units (tick)	Investment account number	Investment account name
				<input type="radio"/>		
				<input type="radio"/>		
				<input type="radio"/>		
				<input type="radio"/>		
				<input type="radio"/>		
				<input type="radio"/>		

Please copy this page and attach to add more investment accounts.

* The number of units must be specified per Fund per Investment Account. The number of units must be of an amount equivalent to \$100 or more per investment account. The number of units received by the transferee may be more or less as a result of units being cancelled or issued to meet any PIE tax payable/refundable by the transferor.

Section 3 – Declaration and authorisation

By signing this Transfer Form I/we acknowledge and confirm that:

The transferee will receive the same number of units in the Fund(s) specified in Section 2 after an adjustment for any units redeemed or issued to satisfy any PIE tax payable or refundable.

If I/we have selected automatic rebalancing, or have asked for my/our investment account(s) to be rebalanced following the transfer of units as a one-off rebalancing, I/we:

- direct the Manager to rebalance my/our holdings back to the investment mandate for each relevant investment account following the transfer; and
- acknowledge and agree that by giving that direction I am/we are deciding which financial products to acquire or dispose of on my/our own behalf (and that the Manager is not making that decision when acting on my/our direction).

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

Where the transferor is an Entity, the above confirmations are given for and on behalf of that Entity (where applicable).

Signature(s) of principal investor/director/trustee/partner

Name Signature Date

Or if the applicant is under the age of 18, the applicant's parent(s) or guardian(s) must confirm the following statement and sign below: I confirm that I am (or that each of us is) a legal guardian of the applicant named in Section 1 and have read and accepted the declarations in section 3 on behalf of the applicant.

Signature(s) of parent/guardian

Name Signature Date

If more than one investor and / or parent / guardian needs to sign this form, please photocopy this page, have the additional persons sign that photocopy, and attach it to this form.

Section 4 – Details of the transferee (complete all applicable fields)

The transferee must also complete section 5 (on the next page).

Client number (if known)

Title First name(s) Surname

IRD number Contact phone ()

Email address

Address

Street no. Street name Suburb

City Postcode Country PO Box (if applicable)

If the transferee has rebalancing turned on, we will automatically rebalance the transferee's investment account back to their investment mandate, if required as a result of this transfer.

If the transferee doesn't have rebalancing turned on, please tick if the transferee wants us to rebalance their investment account(s) back to their investment mandate(s). This will be a one-off rebalance. In either case, in rare circumstances transaction costs (Buy/Sell spreads) may apply.

Yes, please rebalance my investment account(s) back to my investment mandate(s) as a one-off rebalancing.

Section 5 – Transferee declaration and authorisation

By signing this Transfer Form I/we acknowledge and confirm that:

If I/we have selected automatic rebalancing, or have asked for my/our investment account(s) to be rebalanced following the transfer of units as a one-off rebalancing, I/we:

- a. direct the Manager to rebalance my/our holdings back to the investment mandate for each relevant investment account following the transfer; and
- b. acknowledge and agree that by giving that direction I am/we are deciding which financial products to acquire or dispose of on my/our own behalf (and that the Manager is not making that decision when acting on my/our direction).

I/we have received, read and understand the current “Fisher Funds Investment Funds Product Disclosure Statement” (PDS) available at fisherfunds.co.nz/investment-funds/ and understand that additional information about the Fisher Funds Investment Funds (Funds) is available on the Funds’ online register entry.

I/We agree that, by signing this Form, or if I/we are under 18, my legal guardian(s) on my/our behalf, agree to be bound by the Fisher Funds Investment Funds master trust deed and relevant establishment deeds, the PDS (including the initial Application Form that I/we completed), this Form, and the Funds’ online register entry (as each may be amended from time to time).

I/We acknowledge that no person guarantees any investment returns from the Funds or the repayment of my/our investment.

I/We understand that the capital value of my/our investment in the Funds can rise or fall depending on market conditions and the investment decisions of the Manager and its appointed investment manager, and that it is therefore possible that I/we may receive less back than I/we have invested.

If signed under a power of attorney, the attorney certifies that they have not received notice of a revocation of that power.

Where the transferee is an Entity, the above confirmations are given for and on behalf of that Entity (where applicable).

Signature(s) of principal investor/director/trustee/partner

Name

Signature

Date

Or if the applicant is under the age of 18, the applicant’s parent(s) or guardian(s) must confirm the following statement and sign below: I confirm that I am (or that each of us is) a legal guardian of the applicant named in Section 1 and have read and accepted the declarations in section 5 on behalf of the applicant.

Signature(s) of parent/guardian

Name

Signature

Date

If more than one investor and / or parent / guardian needs to sign this form, please photocopy this page, have the additional persons sign that photocopy, and attach it to this form.