

# SIL Mutual Scheme

## Additional Lump Sum Contribution Form



You can email this form and all required supporting documents to [registry@anzinvestments.co.nz](mailto:registry@anzinvestments.co.nz). Alternatively, you can take them to any **ANZ branch**, or post them to **ANZ Investments, Freepost 324, PO Box 7149, Victoria Street West, Auckland, 1142**.

### 1. Your information

First name(s)				Surname			
IRD number	<input type="text"/>	<input type="text"/>	<input type="text"/>	(please call Inland Revenue on 0800 775 247 for help)			
Investor number	<input type="text"/>						
Prescribed investor rate	<input type="checkbox"/> 10.5%	<input type="checkbox"/> 17.5%	<input type="checkbox"/> 28%	(see <a href="http://silfunds.co.nz/updatepir">silfunds.co.nz/updatepir</a> for help)			

### 2. Contribution

Total contribution amount \$

Please invest as per my existing investment selection. (if you select this option, you don't need to complete the investment selection details below)

**OR**

Please invest my additional lump sum contribution as indicated below.

SIL Balanced Plus Fund	\$ <input type="text"/>	or	<input type="text"/>	0 %
SIL New Zealand Fixed Interest Fund	\$ <input type="text"/>	or	<input type="text"/>	0 %
SIL New Zealand Share Fund	\$ <input type="text"/>	or	<input type="text"/>	0 %
SIL International Share Fund	\$ <input type="text"/>	or	<input type="text"/>	0 %
SIL Cash Plus Fund	\$ <input type="text"/>	or	<input type="text"/>	0 %

For details of this investment, contact your adviser or call ANZ Investments on 0800 736 034.

We aim to process contributions and show them in your SIL Mutual Scheme account in ANZ Internet Banking and goMoney within 5 business days if you give us all the information we need. If we have to ask for more information, this may cause delays in the processing of your contribution.

The time it takes us to process a transaction on your behalf (for example, a payment into a fund, a switch or a withdrawal) means the unit price you receive may vary from the price when you requested the transaction.

### 3. Payment details

**Bank account name:** Superannuation Investments Limited – Clearing

**Bank and branch:** ANZ – Cnr Queen and Victoria Streets

**Bank account number:** 01-0102-0211888-00

Make sure you include your investor number, or IRD number, surname and initials in the reference fields.

If your payment is from a third party, please confirm the relationship between you and the third party (e.g. mother, father, employer):

### 4. Your agreement

By signing this form, I agree to contribute to my investment as indicated above. If this declaration is signed under Power of Attorney, the Attorney confirms that he/she hasn't received notice of revocation of that power. Attorneys must provide a certified copy of their Power of Attorney.

If applicable, I have personally affixed my digital signature to this document.

Signature

Date

#### ADVISER USE ONLY

Adviser name	<input type="text"/>
Distributor company name	<input type="text"/>

FSP number	<input type="text"/>
Distributor (agency) code	<input type="text"/>