

The Fisher Funds Growth KiwiSaver Scheme

Application Form

EMPLOYED SAMPLE

Please mail this application form, together with your cheque (if applicable) payable to 'Fisher Funds Growth KiwiSaver Scheme' and any other relevant documentation to:
 Fisher Funds Management Limited, c/o Trustee Executors Superannuation Limited,
 PO Box 409, Wellington, 4163.

Office use only

Investor details

Title	Surname	First names
<input type="text" value="MR"/>	<input type="text" value="WILLIAMS"/>	<input type="text" value="JOE RALPH"/>
Date of birth	IRD no.	Your prescribed tax rate (please tick one)
<input type="text" value="01/01/1970"/>	<input type="text" value="1 2 3 4 5 6 7 8"/>	<input type="checkbox"/> 19.50% <input checked="" type="checkbox"/> 33%
<small>refer to page 14 to determine your applicable rate; if an elected tax rate is not selected, 33% will apply.</small>		
Postal address	Postcode	
<input type="text" value="1/1 FLAT ROAD, MANUREWA, AUCKLAND"/>	<input type="text" value="0100"/>	
Home phone	Business phone	Mobile
<input type="text" value="(09) 123 4567"/>	<input type="text" value="(09) 765 4321"/>	<input type="text" value="(021) 123 4567"/>
Email address	<input type="text" value="joe@xtra.co.nz"/>	

IF YOU ARE EMPLOYED

If you are employed your regular contributions will be made by your employer. If you wish to invest an additional amount directly please contact Fisher Funds.

Elected contribution rate (as a percentage of gross wages or salary)

4% 8%

Primary employer details

Company name	
<input type="text" value="MANUREWA MOWERS"/>	
Postal address	Postcode
<input type="text" value="PO BOX 123, MANUREWA, AUCKLAND"/>	<input type="text" value="0101"/>
Payroll email address	
<input type="text" value="payroll@mm.co.nz"/>	
Business phone	Employer's IRD number
<input type="text" value="(09) 765 4321"/>	<input type="text" value="1 2 5 4 1 7 6 3"/>

Secondary employer details

Company name	
<input type="text"/>	
Postal address	Postcode
<input type="text"/>	<input type="text"/>
Payroll email address	
<input type="text"/>	
Business phone	Employer's IRD number
<input type="text" value="()"/>	<input type="text"/>

DETACH HERE

Transfers from other New Zealand superannuation schemes

Is this a transfer from another KiwiSaver scheme?

Name of scheme

a registered superannuation scheme?

Name of scheme

I apply to transfer my benefit from the above scheme to the Fisher Funds Growth Kiwisaver Scheme. I authorise the Manager or the Trustee of the transferring scheme to provide to Fisher Funds or the Trustee of the Scheme any of my personal information as necessary to complete the transfer of my benefits to the Scheme.

IF YOU ARE NOT EMPLOYED

If you are not employed (self-employed, unemployed, under 18, retired, etc) you will invest directly with Fisher Funds. Please complete the amount of your initial investment. Minimum \$100.

Initial investment \$

(If you are sending a cheque before 1 October 2007, please make the cheque payable to IRD. If after 1 October 2007, please make the cheque payable to 'Fisher Funds Growth KiwiSaver Scheme'.)

Fisher Funds will receive your contributions from IRD on 1 October 2007 and will then start your investment.

Identity Verification Form with Declaration

Identity Verification - Fisher Funds Growth KiwiSaver Scheme

Please provide a photocopy of two of the following:

- New Zealand Passport
- New Zealand Drivers Licence
- Credit card with photo
- Firearms licence
- Marriage Certificate
- Birth Certificate
- Evidence of bank account in your name
- International Drivers Licence

A Birth Certificate will be enough to identify a child. A second form of identification will not be required.

Do you already have an investment with Fisher Funds?

Yes No

The Privacy Act

This statement relates to the personal information that you are providing to the Manager by way of this application and any subsequent personal information which you may provide in the future. The personal information you have supplied may be used by the Manager and the Trustee (and related entities thereof) for the purposes of enabling the Manager to arrange and manage your investment, and to contact you in relation to your investment. The Manager will provide you (on request) with the name and address of any entity to which information has been disclosed. You have the right to access all personal information held about you by the Manager. If any of the information is incorrect, you have the right to have it corrected. You acknowledge that you are authorised to provide personal information on behalf of the applicant and evidence of this authority is provided (in the case of a parent/guardian/other providing information about the applicant) You agree that your/each of your names and addresses may be used by Fisher Funds Management Limited to provide you with newsletters and other information about the Scheme and other products and services.

Declaration

I have read and retained a copy of the attached Investment Statement and agree to be bound by the terms and conditions of the Trust Deed. I understand that the Scheme is a vehicle for long term investment and as the Scheme invests in shares, the value of my investment is liable to fluctuations and may rise and fall from time to time. I understand the manner in which the fees will be deducted from my investment. The Investment Statement and the offer of securities have been made to me in New Zealand.

Signature of applicant



Date

01/07/07

Full name of parent/guardian (if applicant under 18)

Signature of parent/guardian

Date

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