

# NZ Superannuation Scheme Transfer Form (non KiwiSaver)



If you would like help in completing this form, please phone Fisher Funds Management Limited on 0800 FFKIWI (0800 335494).

## Investor details

Title  Surname  First names

Date of birth  /  /  IRD No.

Fisher Funds KiwiSaver Member No.  FI       Contact phone

Email address

## Details of the NZ Superannuation Scheme you wish to transfer from

Name of NZ Superannuation Scheme

Name of provider

Provider address

Account/Membership/Policy number

Additional information

## Please attach with this Form

- A copy of a recent statement from your NZ Superannuation Scheme or
- A copy of your NZ Superannuation Scheme Membership Certificate

I,

hereby authorise the Fisher Funds KiwiSaver Scheme and its staff to act on my behalf and arrange for the transfer of funds from my NZ Superannuation Scheme to the Fisher Funds KiwiSaver Scheme. Please provide them with any information they may require to complete the transfer.

Signature  Date  /  /

## Return form

Please return the completed form and supporting documentation to us by mail, email or fax:

**Mail:** Fisher Funds  
PO Box 33549  
Takapuna  
Auckland 0740.

**Email:** kiwisaver@fisherfunds.co.nz

**Fax:** 09 489 7139

Please call us on 0800 FFKIWI (0800 335494) if you need any help.