



Milford Investment Funds Regular Withdrawal Request Form

This form should be completed if you wish to establish an regular withdrawal from your Milford Investment Funds account.
The minimum amount per withdrawal is \$100.

Once complete please return this form to:

Email: transactions@milfordasset.com

Post: Milford Funds Limited, PO Box 960, Shortland Street, Auckland 1140

Account Details

MILFORD ACCOUNT NAME (e.g. A B Smith)

ACCOUNT NUMBER

M	L						
---	---	--	--	--	--	--	--

Regular Withdrawal Details

REGULAR WITHDRAWAL AMOUNT

\$

FREQUENCY

☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ 6-Monthly ☐ Annually

START DATE*

/	/
---	---

*Allow five business days from our receipt of this form for set up. Note this date is when we will start the withdrawal process, payment can take up to three business days to reach your bank account. Payments are only processed on business days. Withdrawals falling on non-business days will be processed on the next business day.

Please indicate the withdrawal amount that should be taken from each fund:

Milford Conservative Fund	\$	Milford Cash Fund	\$
Milford Diversified Income Fund	\$	Milford Trans-Tasman Bond Fund	\$
Milford Balanced Fund	\$	Milford Global Corporate Bond Fund	\$
Milford Active Growth Fund	\$	Milford Global Equity Fund	\$
Milford Australian Absolute Growth Fund	\$	Milford Trans-Tasman Equity Fund	\$
Milford Aggressive Fund	\$	Milford Dynamic Fund	\$

Milford Investment Funds

Regular Withdrawal Request Form (continued)

Bank Account Details

☐

Please pay the withdrawal into my/our nominated bank account held on file.

If you have not previously provided your bank account details, including proof of the bank account, or your bank account has changed, please complete the section below and provide **proof of your bank account** (refer below) along with this form.

Please note withdrawals will only be paid into a New Zealand domiciled bank account which is in the same name as your Milford Investment Funds holding. We are unable to make payments to third party or international bank accounts.

ACCOUNT NAME

ACCOUNT NUMBER

BANK

BRANCH

ACCOUNT NUMBER

SUFFIX

SUFFIX

PROOF OF BANK ACCOUNT

Please provide a bank record or document that:

- Was issued in the last 12 months
- Includes bank account name
- Includes bank account number
- Includes bank logo

Examples of this include a bank statement, letter from the bank, or mobile banking screenshot.

Investor Identification

Please be aware Milford requires identity and proof of address documents to process a withdrawal.

If Milford does not have this documentation on file for your account, we will contact you to provide these.
A list of acceptable identification documents can be found at milfordasset.com/investing/id-requirements.

Privacy Statement

By completing this form, you acknowledge and accept that Milford Asset Management Limited and any of its related or controlled entities may (i) collect, hold, use, and disclose the personal information you provide (now and in the future) for the purposes outlined in our Privacy Policy available at milfordasset.com/privacy-policy, and (ii) contact you (via any method) about this form or to offer our financial opportunities, products or services (with the option to unsubscribe from marketing communications at any time).

For any queries related to this Privacy Statement or to access or update your information, please email: info@milfordasset.com or call 0800 662 345.

Milford Investment Funds

Regular Withdrawal Request Form (continued)

Authorisation for Individual or Joint accounts

Please note, all signatories recorded on the account need to sign the withdrawal request.

I/We acknowledge and agree to the terms of the Privacy Statement on page 2.

1. FULL NAME OF INVESTOR

SIGNATURE OF INVESTOR

DATE

2. FULL NAME OF INVESTOR (if applicable)

SIGNATURE OF INVESTOR

DATE

Authorisation for Company, Trust or Entity accounts

I/We, trustee(s)/executor(s)/director(s)/partner(s) of (**name of trust/estate/company/partnership**) ("**the entity**") confirm:

- Since the date of my/our application,
 - there have been no changes to the trustee(s)/executor(s)/director(s)/partner(s) of the entity, nor to the governing documents of the entity (e.g. trust deed or partnership agreement), that have not already been notified to Milford; OR
 - to the extent there have been any change(s) which have not yet been notified to Milford, details of such change(s) and copies of the documents effecting the change(s) (for example, deeds of appointment and removal of trustee(s)) and/or copies of any amendments to the governing documents, are attached to this withdrawal form.
- I/We will immediately advise Milford of any subsequent changes to (i) the trustee(s)/executor(s)/director(s)/partner(s) of the entity or (ii) the governing documents of the entity, and will provide to Milford details of such change(s) and copies of the documents effecting the change(s) (for example, deeds of appointment and removal of trustee(s)) and/or copies of any amendments to the governing documents.
- The below named trustee(s)/executor(s)/director(s)/partner(s) are validly appointed as trustees/executors/directors/partner of the entity and remain(s) trustee(s)/executor(s)/director(s)/partner(s) of the entity and have signing authority to act on behalf of the entity. Please note, all signatories recorded on the account must sign the withdrawal request.
- I/We acknowledge and agree to the terms of the Privacy Statement on page 2.

Please use the additional signature and name spaces as required, a second signature page can be used if needed.

1. FULL NAME OF INVESTOR

SIGNATURE OF INVESTOR

DATE

2. FULL NAME OF INVESTOR

SIGNATURE OF INVESTOR

DATE

3. FULL NAME OF INVESTOR

SIGNATURE OF INVESTOR

DATE

4. FULL NAME OF INVESTOR

SIGNATURE OF INVESTOR

DATE

Once complete please return this form to:

Email: transactions@milfordasset.com

Post: Milford Funds Limited, PO Box 960, Shortland Street, Auckland 1140

IWR0625