

# Member election form

## Aon KiwiSaver Scheme

Use this form to select which funds you want to invest in.

Complete and return to: Freepost Aon Retirement Saving, Aon KiwiSaver Scheme, PO Box 332, Shortland St, Auckland 1140 or email to: [aonkiwisaver@linkmarketservices.com](mailto:aonkiwisaver@linkmarketservices.com) If you have any questions about completing this form, please call 0800 AON INFO (0800 266 463).

### Section A: Personal details

IRD number  -  -

Member number AON

Date of birth / /

Title:  Mr  Mrs  Miss  Ms Other

Given name(s)  Surname

Postal address  Postcode

Direct phone  Mobile

Email

### Section B: Tax details

My prescribed investor tax rate is (please tick one box)  10.5%  17.5%  28.0%

Please refer to our document entitled **Aon KiwiSaver Scheme tax** available on the documents page of our website [www.aonkiwisaver.co.nz](http://www.aonkiwisaver.co.nz) to determine the correct rate.

### Section C: Fund selection

You may choose to invest in up to four (4) of the funds below. Your savings will be invested evenly across the funds you select. If you do not make an election your contributions will be invested in the default fund selected by the Manager.

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> ANZ Cash                         | <input type="checkbox"/> ANZ Balanced                    | <input type="checkbox"/> Russell LifePoints® Growth           | <input type="checkbox"/> Russell LifePoints® Target Date 2045 |
| <input type="checkbox"/> Nikko Cash                       | <input type="checkbox"/> Nikko Balanced                  | <input type="checkbox"/> Russell LifePoints® Target Date 2025 | <input type="checkbox"/> Russell LifePoints® Target Date 2055 |
| <input type="checkbox"/> Russell LifePoints® Conservative | <input type="checkbox"/> Russell LifePoints® Balanced    | <input type="checkbox"/> Russell LifePoints® Target Date 2035 |   |
| <input type="checkbox"/> Russell LifePoints® Moderate     | <input type="checkbox"/> Milford Active Growth Wholesale |   |   |

Details of the above funds are set out in the Product Disclosure Statement under Section 3.

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### Section D: Privacy

The personal information you are providing in this form, (or in connection with this form) is being collected for the main purpose of effectively administering and managing your Aon KiwiSaver Scheme account in compliance with all relevant law. If you do not provide us with your personal information, we may not be able to process your election. The information may also be used for the purpose of verifying your identity electronically or providing you with information about products and services we think might be of interest to you (including from our parent company Fisher Funds). The information may be used by, and disclosed to the supervisor, the Manager (Aon Saver Limited), the Administration Manager, or other entity involved in the administration and management of the Aon KiwiSaver Scheme (including Inland Revenue and any regulatory body) or your financial adviser. The information you provide may also be used by external agencies appointed by us for the purposes of verifying your identity.

You agree that this information may be collected, held and disclosed for these purposes. The information is being collected by the Manager (Aon Saver Limited), whose address is PO Box 332 Shortland Street, Auckland 1140, and will be held by Link Market Services Limited who you can contact at PO Box 332 Shortland Street, Auckland 1140. You can request access to your personal information and can ask that it is corrected by calling 0800 266 463.

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### Section E: Confirmation

I have read and understood the privacy statement set out in Section D.

Signature of applicant	<input type="text"/>	Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature of parent/legal guardian	<input type="text"/>	Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature of parent/legal guardian	<input type="text"/>	Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

ALL parents or guardians must sign if applicant is under 16 years of age, or one parent or guardian if applicant is 16–17 years of age. Only one signature is needed for children on transfers if declaration below is signed.

#### Declaration

When acting on behalf of another legal guardian or all other legal guardians I am doing so following consultation with and with agreement of that person or all such persons.

Signature

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Please return the completed form and documentation to:

#### Freepost Aon Retirement Saving

Aon KiwiSaver Scheme, P O Box 332, Shortland St, Auckland 1140.

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