State Sector Retirement Savings Scheme **Lump Sum Deposit Form**



Please return this completed form to superlife@superlife.co.nz or post to: SuperLife SMT, PO Box 105262, Auckland 1143.

SECTION 1: PERSONAL DETAILS								
Member number	Scheme name							
	State Sector Retirement Savings Scheme							
Title (Mr, Mrs, Miss, Ms, Mx, Dr or Other)	Date of birth							
First name	Surname							
Home phone	Work phone							
Mobile	Email							
Occupation (must be supplied)								
Home address								
Street address								
Suburb								
Town/city								
Country	Postcode							
SECTION 2: TAX DETAILS								
Note: If you have already provided us with your IRD n has changed, please tick the correct PIR. If you haver	umber and PIR, please ignore this section. If your PIR o't given us your IRD number and PIR, we will apply a							
tax rate of 28% to any taxable income applicable to yo								
IRD number (Must be supplied)	Prescribed Investor Rate (PIR) (Tick one)							
	10.5% 17.5% 28%							
Refer to ird.govt.nz/roles/portfolio-investment-entities/find-my-p	rescribed-investor-rate to calculate your PIR.							

SECTION 3: FUND SELECTION FOR ADDITIONAL INVESTMENT

	invest the following amou		in accordance with my existing fund selection					
OR	as indicated below into my SuperLife Superannuation Master Trust account.							
I have paid via internet banking into the SuperLife Superannuation Master Trust bank account 12 3113 0003586 00 on D D M M V V Note: Please ensure that any payments made via internet banking can be identified. The reference fields should contain your State Sector Retirement Savings Scheme member number and your surname and initials.								
		stirement davings done	me member number and your surname and initials.					
Funds		_	restment amount (\$ value)					
Funds	e SMT Moderate Fund	_	,					
Funds SuperLi	,	Inv	,					
Funds SuperLin	e SMT Moderate Fund	Inv \$,					
Funds SuperLin SuperLin	fe SMT Moderate Fund fe SMT Balanced Fund	Inv	,					
Funds SuperLin SuperLin	fe SMT Moderate Fund fe SMT Balanced Fund fe SMT Growth Fund	Inv \$ \$ \$,					

SECTION 4: PRIVACY AUTHORISATION

The personal information you provide in this form, and any information you provide to us in the future, will be collected by Smartshares Limited (Smartshares), as Manager of the SuperLife Superannuation Master Trust, for purposes relating to the administration, operation, management and marketing of the scheme. Your personal information will be collected, used, stored and disclosed in accordance with the Privacy Act 2020 and SuperLife's Privacy Policy, which is available at superlife.co.nz/legal/privacy-policy.

You have the right to access and request correction to any personal information that you have supplied to Smartshares, by contacting superlife@superlife.co.nz.

SECTION 5: AUTHORISATION AND SIGNATURE

- I understand that the capital value of this Investment can rise or fall depending on market conditions. I may therefore receive back less than I invested.
- I understand that my lump sump contribution will be invested as soon as practicable after receipt of this completed form.
- I grant express consent for the manager, Smartshares Limited (Smartshares) to disclose my information to its related companies.
- I acknowledge that making a fund selection is my responsibility, and that neither Smartshares nor the Supervisor is to be regarded as representing or implying that my fund selection is appropriate for my personal circumstances; and my fund selection will be a binding direction from me to the Manager.

Member's signature	Date								