

MAS KiwiSaver Scheme

Authority to Transfer Superannuation Funds into the MAS KiwiSaver Scheme Form

Please forward completed documents to:

masinvest@linkmarketservices.com

Or post to:

MAS Superannuation FreePost 884 PO Box 91976 Victoria Street West, Auckland 1142

For assistance:

Phone 0800 627 738

Email masinvest@linkmarketservices.com

(i) Important information

The MAS KiwiSaver Scheme is registered under the Financial Markets Conduct Act 2013.

Name: MAS KiwiSaver Scheme, SCH10705

If you are transferring from an Australian complying superannuation scheme you will need to complete a different form. You can find more information on our website at mas.co.nz/superannuation-transfer-australia

Full name	Title	First names (s)		Surname			
Member number	(if known)		Date of birth	dd-mm-yyyy			
Postal Address							
			City	Postcode			
Phone number	Home		Work	Mobile			
Email							
Prescribed investor rate (PIR)		10.5%	17.5%	28%			
Please refer to <u>ird.govt.nz/pir</u> for more information on how to determine your PIR.							

2. Details of the superannuation scheme you wish to transfer from

Please provide a copy of the statement or other correspondence from the company you have your superannuation with, so we can get information such as your account or reference numbers.

Name of company			
Company address			
	Cit	ty	Postcode

What name is the investment in?

Account/reference number

3. Authority to act on your behalf

I the undersigned wish to arrange for my superannuation scheme with you to be transferred as soon as possible to the MAS KiwiSaver Scheme, a registered superannuation scheme.

I hereby authorise the Manager, Medical Funds Management Limited, and its agents, including Medical Assurance Society New Zealand Limited and Link Market Services Limited to act as my agent for the purposes of actioning this transfer. Please provide them with all the information they require to carry out this instruction.

Privacy Statement

We collect, store, use, and disclose your personal information in accordance with our Privacy Statement which is available on our website at mas.co.nz/privacy-statement. You can contact us in relation to your privacy by emailing privacyofficer@mas.co.nz or calling us on 0800 800 627.

Signature of Member	Date dd-	mm-yyyy

mas.co.nz