

Member voluntary lump sum contribution form

Aon KiwiSaver Scheme

Use this form to make a lump sum contribution to your KiwiSaver account. We will also require you to complete an AML Identity Verification form which is available on our website www.aonkiwisaver.co.nz.

Section A: Personal details

IRD number - -

Member number **A** **O** **N**

Date of birth / /

Title: Mr Mrs Miss Ms Other

Given name(s) Surname

Postal address Postcode

Direct phone Mobile

Email

Section B: Lump sum contribution

My cheque is enclosed (please enter amount)

Please make cheques payable to **Aon KiwiSaver Nominees Ltd.**

Please invest this voluntary contribution

- as per my current investment election
- as per the Election to switch investment form (AS6) attached

For contributions of \$30,000 or more you may be required to complete a separate form for Anti-Money Laundering identity verification purposes. Please contact us for further assistance.

Section C: AML requirements

Due to the requirements of the Anti-Money Laundering and Countering Financing of Terrorism Act 2009, we need to obtain information about the source of your funds and/or wealth before we can accept this contribution. If you do not work, please state your position e.g., retired, student.

Occupation

Please indicate below which income bracket applies to you.

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Under \$30,000 | <input type="checkbox"/> \$40,000 – \$50,000 | <input type="checkbox"/> \$60,000 – \$70,000 | <input type="checkbox"/> \$80,000 – \$90,000 |
| <input type="checkbox"/> \$30,000 – \$40,000 | <input type="checkbox"/> \$50,000 – \$60,000 | <input type="checkbox"/> \$70,000 – \$80,000 | <input type="checkbox"/> \$90,000 or more |

Section C: AML requirements (continued)

Please indicate below how you acquired the money you are investing.

- | | |
|--|--|
| <input type="checkbox"/> Compensation payment | <input type="checkbox"/> Lottery/betting win |
| <input type="checkbox"/> Inheritance | <input type="checkbox"/> Sale of investments |
| <input type="checkbox"/> Salary/bonus | <input type="checkbox"/> Savings |
| <input type="checkbox"/> Sale of company | <input type="checkbox"/> Gift |
| <input type="checkbox"/> Money from existing Trust | <input type="checkbox"/> Policy claim/maturity |
| <input type="checkbox"/> Divorce settlement | <input type="checkbox"/> Sale of property |
| <input type="checkbox"/> Other | |

If other, please provide details

Section D: Privacy

The information in this form, and in any documents relating to it, is being collected for the purposes set out in this form, including effectively managing your Aon KiwiSaver Scheme account. The information may be used by, and disclosed to, the Manager and the Supervisor of the Scheme, authorised agents, and to any other entity that is involved in the administration and management of the Scheme (including Inland Revenue and any regulatory body). You agree that the Supervisor, the Manager and their authorised agents may collect and use the information for these purposes. The information is being collected by Aon Saver Limited whose address is Level 16, AMP Centre, 29 Customs St West, Auckland and will be held by Link Market Services Limited at Level 11, Deloitte Centre, 80 Queen Street, Auckland. You can request access to your personal information and can ask to correct that information by calling 0800 266 463.

Section E: Acknowledgement

I understand that this voluntary contribution to my Member's Account balance will be:

- invested in the fund(s) I have selected; and
- the contributions will be implemented as soon as practicable after receiving this completed form and the funds being cleared by my bank.

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

Signature

Date

Checklist

I have:

- Completed sections A, B, C and E of this form
- Completed an AML form (if required)

Please return the completed form and documentation to:

Freepost Aon Retirement Saving

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

If you have any questions about completing this form, please call 0800 AON INFO (0800 266 463).