

The Law Retirement Plan Application Form



Investment Statement Dated 20 October 2010

Please mail this application form, together with your cheque (if applicable and payable to: "The Law Retirement Plan") and enclose any other relevant documentation to:

The Law Retirement Plan, C/- Aon New Zealand Limited, PO Box 3167, Shortland Street, Auckland 1140.

My Investor Details

Do you already have an investment with the Law Retirement KiwiSaver Scheme:

Yes

No

Investor Number:

Name:

Date of Birth:

Gender: Male / Female (please circle)

IRD Number:

PIR Rate: 10.5% / 17.5% / 28% (please circle one)

Postal Address:

Email:

Telephone:

Mobile:

Fax:

My Primary Employer Details

Company Name:

Postal Address:

Telephone:

Payroll Clerk:

My Secondary Employer Details

Company Name:

Postal Address:

Telephone:

Payroll Clerk:

My Investment Allocation Details

Allocation of regular contributions

Balanced Fund:

Please tick one to
select Portfolio

Dynamic Fund:

Single one-off lump sum contribution

\$

\$

If no Portfolio is selected, your contributions they will automatically be invested in the Balanced Portfolio.

Direct Deposit payment details, Bank Account: Law Retirement Plan-KiwiSaver, Account Number: 01-0505-0278171-00
(Please put your name as a reference)

Direct Debit Investment

I/We wish to invest:

per:

Commencing:

Frequency (choose from monthly,
quarterly, six monthly, or annually.

Complete the direct debit form included in this Investment Statement.

Investor Information

Identity Verification

The Financial Transactions Reporting Act 1996 requires deposit takers to verify the identity of all new investors. Please provide a true copy of either your passport or drivers licence for identification.

Please tick one: Passport Drivers licence

Declaration

I have read the attached Investment Statement, in which this application form was contained, setting out a summary of my rights, obligations and benefits as contained in the Law Retirement Trust Deed.

I have read the Terms & Conditions stated in the attached Investment Statement, in which this application form was contained.

I agree to be bound by the provisions of the Trust Deed and hereby apply to become a member of The Law Retirement Plan.

If signed under Power of Attorney, the attorney hereby certifies that he/she has not received notice of revocation of that power.

Signed: _____

Dated: _____

Instructions Authorisation

Email/facsimile—I authorise The Law Retirement Plan administrator or any other company related to The Law Retirement Plan to provide information regarding my investments via email or facsimile and to act on instructions regarding my investments received via email, facsimile or via the secure login on the Administrators website. The email address and/or facsimile number that The Law Retirement Plan may provide information to and act on instructions from are as detailed in this application form (or as otherwise notified to The Law Retirement Plan in writing from time to time).

Liability Limitation and Indemnity—I acknowledge that The Law Retirement Plan does not accept any responsibility or liability whatsoever for any damage, costs, expenses, losses or liabilities incurred by any person as a result of The Law Retirement Plan administrator acting on any instructions from an authorised signatory or an authorised email address or facsimile number. I agree to indemnify in all respects and hold harmless The Law Retirement Plan against damage, costs, expenses, losses or liabilities which may arise by reason of The Law Retirement Plan accepting or acting on instructions from an authorised signatory or, an authorised email address or facsimile numbers.

Advisor Stamp