INDIVIDUAL RETIREMENT PLAN
Lump Sum Contribution Advice

Please use BLOCK letters. Complete in full and return with your cheque, payable to the "Individual Retirement Plan", to the adjacent address.

The Administration Manager
Individual Retirement Plan
Mercer (N.Z.) Limited
P O Box 1849
Wellington

Telephone: 0800 477 111
Direct Line: 04 890 7000
Fax: 04 914 0434

- **Name: Mr/Mrs/Miss/Ms** .....
  Surname ***Given Names***
- **Postal Address**: .....
  .....
- **Contact Telephone Number**: ..... **Date of Birth** ……/……/……
- **Employer Name**: .....
- **Contract Number**:*(if known)* .....

Amount of this Contribution: **$_____**

Note that this contribution shall be invested in accordance with your current Investment Fund selection.

Should you wish to change your current selection you are able to do so by completing an Investment Alteration Request Form.

SIGNED……..…… **DATE** ……/……..…/……..

Mercer Use:

Date Received and Banked ……./……./……. **Entered** ……..……..……

Details Verified ……...…….…… **Receipt Provided** ……/……./……