



QUALIFYING & DEFERRED MEMBER INVESTMENT CHOICE ELECTION/SWITCH FORM

To: The Trustee, Ports Retirement Plan (**Plan**)

Full name: _____ (please print)

Date of birth: _____

Membership number: _____

Contact telephone number: _____

I confirm that I have read and understood the Product Disclosure Statement and taken all such advice as I consider necessary or appropriate for the purposes of this form.

I hereby direct the Trustee that my Plan balance shall be invested as shown (you can choose a single investment option or a mix. If you choose a mix, ensure percentages are rounded to the nearest whole percent and that the total adds up to 100%):

Conservative	%
Balanced	%
Total	100 %

I understand that:

- (i) choosing an investment strategy is solely my responsibility, and neither the Trustee nor the Rail and Maritime Transport Union Incorporated is to be regarded as representing or implying that a particular investment option (or combination) is appropriate for my personal circumstances;
- (ii) my choice of an investment strategy is a binding direction from me to the Trustee for the purposes of the Trustee Act 1956;
- (iii) my election will take effect on the next 1 January or 1 July (so long as the Administration Manager has received this form at least **5 business days** before the relevant effective date);
- (iv) no switch fee is payable for the first change made during any year commencing 1 January, but that the second change during that year will incur a \$50 switch fee;
- (v) this election revokes any previous investment election that I may have made (and to the extent that any combination of options I have chosen does not equal 100%, any unallocated portion will be invested in the Balanced option.

Signed: _____ Date: _____

Please complete this form and send it to the Trustee,
c/- the Administration Manager, Ports Retirement Plan, PO Box 11330, Wellington 6142.