

AMP Investment Trust (AIT)

Additional contributions

Use this form to make an additional lump sum contribution or set up a new regular payment into the AIT fund(s) you already hold an investment in.

Important note: Before we can process your instructions you must have read the latest Product Disclosure Statement for the AIT. Please complete Section (c) to confirm.

This form can be completed on-screen by typing content directly into the PDF document. Once you have completed your details, print, sign and send the form and any supporting documents to the address above.

* These fields must be completed

(a) Your personal details

*Portfolio number

Title

 Mr Mrs Ms Miss Dr Other

*First names

*Surname

Title

 Mr Mrs Ms Miss Dr Other

^First names

^Surname

*Name of entity (for trusts, companies and partnerships only)

*IRD number (if you have an 8 digit IRD# leave the first box blank)

*Personal email

*Postal address (if different to residential address)

<input type="text"/>	Postcode
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*Please provide at least one contact phone number

Home phone

Work phone

Mobile phone

(b) Your additional contribution details

*Please tell us how you would like to make your additional contribution (please tick those that apply).

 Internet banking/Direct Credit to AMP Investments Trust for \$
 Transfer from an existing AMP product - the existing product must allow you to transfer

Existing AMP product number Existing AMP product type

Amount to be transferred \$

Please also complete the Scheme Transfer Request Form available from your Adviser or by calling us on 0800 267 111.

New regular payment

To set up a new regular investment to your plan, complete the Direct Debit Authority available at amp.co.nz and attach to this form.

Tell us if you'd like a yearly increase to your regular payment Yes (select one) CPI or % (minimum 5%)

Please tell us how you would like your additional contribution split across your account(s) and funds.

*Do you want to allocate your additional contribution as per the portfolio's existing investment profile?

Yes (Please go to straight to Section (c). You **do not** need to complete the table below)

No (Please complete the table below. The information you provide below applies to all future payments unless you advise otherwise)

If you have more than four accounts that you want to make an additional contribution to, please photocopy this page and attach to this form.

Fund	Lump sum payment					Regular payments				Office Use
	Account 1	Account 2	Account 3	Account 4		Account 1	Account 2	Account 3	Account 4	
Percentage of lump sum and/or regular payment amount to each account (this row must total 100%) [≠]	%	%	%	%	100%	%	%	%	%	100%
Diversified funds										
AMP Select Conservative Fund [^]	%	%	%	%		%	%	%	%	302
AMP Moderate Fund	%	%	%	%		%	%	%	%	380
AMP Select Balanced Fund [^]	%	%	%	%		%	%	%	%	303
AMP Balanced Fund	%	%	%	%		%	%	%	%	381
AMP Select Growth Fund [^]	%	%	%	%		%	%	%	%	304
AMP Growth Fund	%	%	%	%		%	%	%	%	382
AMP Aggressive Fund	%	%	%	%		%	%	%	%	387
Single sector funds										
AMP Select Income Fund [^]	%	%	%	%		%	%	%	%	301
AMP Select Cash Fund [^]	%	%	%	%		%	%	%	%	300
AMP New Zealand Cash Fund	%	%	%	%		%	%	%	%	388
AMP Global Fixed Interest Fund	%	%	%	%		%	%	%	%	385
AMP NZ Fixed Interest Fund	%	%	%	%		%	%	%	%	392
AMP Fixed Interest Income Fund	%	%	%	%		%	%	%	%	390
AMP Global Fixed Interest Fund No. 2 [^]	%	%	%	%		%	%	%	%	307
AMP New Zealand Shares Fund No.2 [^]	%	%	%	%		%	%	%	%	308
AMP New Zealand Shares Fund [^]	%	%	%	%		%	%	%	%	319
AMP Australasian Shares Fund	%	%	%	%		%	%	%	%	384
AMP International Shares Fund No.2 [^]	%	%	%	%		%	%	%	%	309
AMP International Shares Fund No.4 [^]	%	%	%	%		%	%	%	%	326
AMP International Shares Fund No.3 [^]	%	%	%	%		%	%	%	%	322
AMP International Shares Fund	%	%	%	%		%	%	%	%	386
ANZ Property Fund	%	%	%	%		%	%	%	%	391
AMP Emerging Markets Fund	%	%	%	%		%	%	%	%	393
Total**	100%	100%	100%	100%		100%	100%	100%	100%	

Notes:

[≠] The 'Percentage of lump sum and/or regular payment amount to each account' row must sum to 100%.

** Each column should sum to 100% (excluding the 'Percentage of lump sum and/or regular payment amount to each account' row).

[^] You must already have an existing holding in this fund.

Advice

Do you have an adviser?

(i.e. an individual who is authorised to provide financial advice to you in relation to AMP products)

Yes No

If **yes**, please ensure your Adviser completes section (e).

(c) Acknowledgements

1. I/We confirm that I/we have received, read and understood and agree to be bound by the terms of the latest Product Disclosure Statement for the AMP Investment Trust. You can find the latest Product Disclosure Statement at amp.co.nz/amp/forms.

Please tick to confirm

2. I/We acknowledge that this application, and any personal statements made in connection with it, will form the basis of, and be included in, the contract for investments with AMP. The relevant legal documentation will contain the usual conditions and the special conditions, if any agreed upon.
3. I/We understand that none of the Supervisor, AMP, or any related company of the Supervisor or AMP, their directors or any other person guarantees the performance of AMP Investment Trust or the funds.
4. I/We acknowledge that
- choosing an investment fund (or funds) is my responsibility, and that neither AMP nor the Supervisor is to be regarded as representing or implying that my chosen investment fund or funds is appropriate for my personal circumstance;
 - my choice of investment fund or funds will be a binding direction from me to AMP.

Member signature

*Date

Member signature

*Date

Member signature

*Date

Or, if the applicant is under the age of 18, the applicant's parent(s) or guardian(s) must confirm the following statement and sign below;

I/We, _____ full name of parent or guardian _____, confirm that I/we have read and accepted the 'Acknowledgements' in Section (c) on behalf of the minor named in Section (a).

Signature(s) of parent(s) or guardian(s)

*Date

We may contact you for additional information to complete applications for applicants under the age of 18.

(d) Account names and Adviser fees

Account name	Portfolio servicing fee	One-off advice fee	Lump sum contribution fee	Regular payment contribution fee	Complete to automatically rebalance your account# (please tick)
1.	UP TO 1.5% P.A.	NIL OR \$	UP TO 5%	UP TO 5%	M <input type="checkbox"/> Q <input type="checkbox"/> HY <input type="checkbox"/> Y <input type="checkbox"/>
2.	UP TO 1.5% P.A.	NIL OR \$	UP TO 5%	UP TO 5%	M <input type="checkbox"/> Q <input type="checkbox"/> HY <input type="checkbox"/> Y <input type="checkbox"/>
3.	UP TO 1.5% P.A.	NIL OR \$	UP TO 5%	UP TO 5%	M <input type="checkbox"/> Q <input type="checkbox"/> HY <input type="checkbox"/> Y <input type="checkbox"/>
4.	UP TO 1.5% P.A.	NIL OR \$	UP TO 5%	UP TO 5%	M <input type="checkbox"/> Q <input type="checkbox"/> HY <input type="checkbox"/> Y <input type="checkbox"/>

#Your account will be rebalanced in line with the investment profile you have provided. Rebalancing is available Monthly (M), Quarterly (Q), Half Yearly (HY) or Yearly (Y).

(e) Adviser use only

Adviser name

B	L	O	C	K		L	E	T	T	E	R	S							
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AMP Adviser code

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Adviser's business name

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I certify that I have completed the most recent training provided by AMP for this product, and have complied with the requirements of the Financial Markets Conduct Act 2013, and all other applicable laws.

Signature of Adviser

SIGN HERE																			
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Date

D	D	M	M	2	0	Y	Y
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***Checklist**

Please check you have completed the form correctly

- Have you completed all fields with an *?
- Have all required investors signed and dated the form?
- Have you read the latest Product Disclosure Statement for the AMP Investment Trust and confirmed this in Section (c)?