

Changes to your personal details or employer

Mr / Mrs / Ms / Miss _____ Last Name _____

First Names _____

Full Postal Address _____

Date of Birth _____ IRD N^o _____

Phone _____ Mobile _____ Email* _____

*By providing my email address, I am consenting to receiving information about the Scheme (including the annual report) electronically including by way of a hyperlink. Should I not wish to receive such information electronically, or should my email address change, I undertake to advise the Scheme's administration manager (Mercer) whose contact details are shown below.

1. Change personal details

Details to be changed _____

If you are updating your date of birth or surname, please provide evidence of this, e.g. a photocopy of your birth certificate, passport or marriage certificate.

2. Transfer to another employer within the Dairy Industry Superannuation Scheme

My current employer is _____

My new employer will be _____

I expect to start service with my new employer on _____ My new payroll number is _____

My signature below authorises the changes shown on this form.

Signed by member _____ Date _____

MEMBER – PLEASE RETURN COMPLETED FORM TO YOUR PAYROLL/HUMAN RESOURCES DEPARTMENT

PAYROLL/HUMAN RESOURCES – PLEASE RETURN COMPLETED FORM TO: DAIRY INDUSTRY SUPERANNUATION SCHEME, C/- MERCER (N.Z.) LIMITED, PO BOX 1849, WELLINGTON 6140 TELEPHONE: 0800 355 900 FAX: 04 819 2699

Company Payroll/Human Resources Authorised Signatory to complete:

Effective date of change _____

Signed _____ Date _____