

Distribution Request Form

New Zealand

DISTRIBUTION REQUEST FORM

APPLICATION

PLEASE PRINT IN BLOCK LETTERS

To: **GP Trusts New Zealand Ltd** ATF the

Trust.

For further details or information, please contact:

Name

Address

I, the undersigned, certify that I am a beneficiary of the

Trust ('**the Trust**').

Dated this

Day of

Year

Signature of Beneficiary

Name of Beneficiary (in print)

I wish to claim the following distribution from the Trust:

Cash

Amount (Currency)

Bank Name and Address

Account Name

Branch Name and Number

Bank Swift Code

In-specie Asset*

Asset Detail

Transferee Name

*An additional fee may be charged for in-specie distribution