

# Change of Portfolio Selection Form



PO Box 5520, Lambton Quay, Wellington  
P: 04 499 8430  
E: info@synergyinvestments.co.nz

Account Number

Account Name

PLEASE CHANGE THE PORTFOLIO SELECTION FOR THE ABOVE ACCOUNT TO THE BELOW SECTION

## PORTFOLIO

PLEASE TICK WHICH PORTFOLIO THE CLIENT NOW WISHES TO INVEST IN

- 20/80     30/70     40/60     50/50     60/40  
 70/30     80/20     90/10     98/2  
 SRI 30/70     SRI 50/50     SRI 80/20     SRI 98/2

## DECLARATION & SIGNATURES

(Must be signed by authorised signatories in accordance with the signing rule established for this investment in the Application Form)

- I/We request to change our investment portfolio as indicated on this form and confirm I have the authority to act on behalf of this Synergy Investment  
 I/We acknowledge that we have read and understood the terms as set out in the Synergy Investment Service Disclosure Statement.

## INVESTOR REPRESENTATIVES

INVESTOR REPRESENTATIVE: Full Name

Signature

Date

DD / MM / YYYY

INVESTOR REPRESENTATIVE: Full Name

Signature

Date

DD / MM / YYYY

INVESTOR REPRESENTATIVE: Full Name

Signature

Date

DD / MM / YYYY

INVESTOR REPRESENTATIVE: Full Name

Signature

Date

DD / MM / YYYY

## RETURN FORM INFORMATION

- A) Email the form and any required documents with the subject line in the format below to:

[INFO@SYNERGYINVESTMENTS.CO.NZ](mailto:INFO@SYNERGYINVESTMENTS.CO.NZ)

Subject: (Account name)(Account number) Portfolio Selection

Date emailed

Senders name

- B) AND post the originals to:

SYNERGY INVESTMENTS  
PO BOX 5520  
LAMBTON QUAY, WELLINGTON

## SYNERGY ADMIN USE ONLY

1. Portfolio selection changed     Yes     No  
 2. Portfolio reweighted     Yes     No  
 3. Admin member

Name

Date

Signature

## NOTES