Redemption request

Integral Master Trust



This form is used to request a redemption of Units from your investment in the Integral Master Trust funds. You can either complete **Section 2** (Redemption request) or **Section 3** (Express redemption facility), not both.

Name of investor(s):									
Investor number(s): N	estor number(s): NZB				NZB				
I/We have provide	d my/our identit	y and pr	oof of addre	ess fo	r verifi	cation			
. Redemption r	equest								
lease make the following	redemption from	m my/ou	ır investmen	t in tl	ne Inte	egral Master Trust	funds:		
Redemption units									
Fund	Number of units		% to rede	em			Notes / Account ref		
Defensive Fund		OR		%	OR	Total units			
Diversified 40 Fund		OR		%	OR	Total units			
Diversified 60 Fund		OR		%	OR	☐ Total units			
Global Equities Fund		OR		%	OR	☐ Total units			
Focused Growth Fund		OR		%	OR	Total units			
Redeem a dollar am	ount								
Fund	Gross ar	nount¹			Net	t amount²	Notes / Account ref		
Defensive Fund	\$		OR	\$					
Diversified 40 Fund	\$		OR	\$					
Diversified 60 Fund	\$		OR	\$					
Global Equities Fund	\$		OR	\$					
Focused Growth Fund	\$		OR	\$					
¹ This is the value of the units th ² This is the amount which will b									
Reason for withdray	a!*								
Reason for withdray	waı⁼								

*Please note this information is requested solely in relation to NZBritannia's Anti-Money Laundering obligations.

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3. Express redemption facility

Fund	Net amount ³	Notes / Account ref
Defensive Fund	\$	
Diversified 40 Fund	\$	
Diversified 60 Fund	\$	
Global Equities Fund	\$	
Focused Growth Fund	\$	

³ Amount must be less than \$50,000 where the redemption amount requested is less than 50 percent of the total value of your investment. This is the amount you will receive in your bank account. The value of the units that will be redeemed will be higher than this amount due to PIE tax, and an Express Redemption Fee of \$20 or any costs incurred from irregular client instructions (e.g., bank fees and FX spreads).

4. Regular redemption

I/we wish to set up a regular redemption from my/our investment: (NZBritannia will credit your withdrawal amount to your nominated bank account around the 15th of each month.) Yes:							
Net	Gross of (before) PIE tax	- this is the value of the total ur	nits that wil	l be redeemed			
Redemption amount:	\$	Anniversary date:	/	/			
Account name:		count number	Suffix				
Frequency:	Monthly (default)	Quarterly Half yea	arly	Yearly			

Fund	Amount	Minimum redemption	Notes / Account ref
Defensive Fund	\$	Minimum \$250	
Diversified 40 Fund	\$	Minimum \$250	
Diversified 60 Fund	\$	Minimum \$250	
Global Equities Fund	\$	Minimum \$250	
Focused Growth Fund	\$	Minimum \$250	
TOTAL (must equal redemption amount above)	\$		

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5. Payment instructions

Please pay the red	demption	proceeds to:		
Account name:				
Account number:			Account number	
We may ask you for proof of your bank details before processing this redemption request.				

6. Authorisation

I/we understand that if my/our redemption request is accepted by the Manager prior to noon (NZ time) it will be processed at the price applicable for the day it is received, but if it is accepted after this time it will be processed at the next day's redemption price.

I/we understand that I/we will generally receive the proceeds of this redemption within 10 days, although this may take up to 60 days in some circumstances.

If I/we have requested an express redemption I/we agree to payment of a \$20 fee to the relevant fund.

I/we understand that the Manager may refuse to process my/our redemption using the express redemption facility or may process the redemption for a lesser amount than requested, at its absolute discretion and does not have to provide a reason. I/we understand that in this case the application, or the remainder of the application, will be processed using the standard redemption process and I/we will not be charged a fee.

I/we understand that unless a full withdrawal is being made I/we must maintain a minimum \$10,000 investment combined across all Funds, and a minimum investment of \$1,000 in each Fund. The Manager may refuse to give effect to this withdrawal instruction if a partial withdrawal request would result in a breach of that requirement.

I/we agree to be bound by the conditions of the current Product Disclosure Statement and Trust Deeds of the relevant fund.

I/we understand that under the Privacy Act 2020 I/we have the right to access all my/our personal information held by you the Manager, and if any information held by you is incorrect I/we have the right to have it corrected.

I/we consent to NZBritannia using the information I/we supply to verify my/our identity in accordance with the requirements of the Anti-Money Laundering and Countering Financing of Terrorism Act 2009, and that NZBritannia may disclose the information to parties NZBritannia considers to be appropriate for this.

Signature of applicant, trustee or director:	Date:	/	/	
Name:				
Signature of applicant, [trustee or director:	Date:	/	1	
Name:				
Signature of applicant, trustee or director:	Date:	/	1	
Name:				
Signature of applicant, [trustee or director:	Date:	/	1	
Name:				

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Please return this form to your adviser.



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