AMP CAPITAL

Change of details form

AMP Capital Investment Funds, Cash Advantage Fund and Term Advantage Fund

PERSONAL DETAILS

Client number

Title | Surname

Given names (s)

Address

Home phone ( )

Work phone ( )

Adviser phone ( )

NEW DETAILS

Title | Surname

Given names (s)

Note: If you are changing your name, please attach a copy of the document showing the legal change of name (e.g. copy of marriage certificate or deed poll).

Address

Home phone ( )

Work phone ( )

NEW BANK ACCOUNT

Bank | Branch | Account No. | Suffix

ENTITY/JOINT NAME to be able to change entity name

AUTHORISATION

☐ I confirm that the above information is correct and authorise AMP Capital Investors to amend my records to reflect the changes indicated above.

SIGNATURES

All account owners must sign.

Owner signature _____ Date _____

Owner signature _____ Date _____

Owner signature _____ Date _____

Please send this form to: AMP Capital Investment Funds, PO Box 106-435, Auckland.
Fax (09) 360 4501 Email query@ampcapital.co.nz
If faxed or emailed, please ensure you post the original to PO Box 106-435, Auckland