

# Regular Contribution Authority

## Forsyth Barr Cash Management

If you have any questions regarding this form, please contact your Investment Adviser on 0800 367 227.

**Account Number:** Please note your Forsyth Barr account number can be up to ten characters long.

Account Name:

Account Number:

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I wish to start regular contributions to Forsyth Barr Cash Management Nominees Limited on:

DAY		MONTH		YEAR			

I wish to make regular contributions (as indicated below) via Direct Debit:

**Frequency:** Please tick one box only.

Frequency: ☐ Weekly ☐ Fortnightly ☐ Monthly ☐ 4 weekly

New regular contribution: \$

I have also completed and attached the Forsyth Barr Cash Management Direct Debit Form.

Name:

Signature:

Date:

DAY		MONTH		YEAR			