TRIPP, ROLLESTON & CO.

AUTHORITY TO INVEST MONEY ON CLIENT BEHALF

I, …….. hereby authorise **Tripp Rolleston & Co**
(full legal name)

Please tick the appropriate option box

☐ to invest the monies held on my behalf for periods of up to one year, earning the highest current prevailing ASB interest

☐ to invest the sum of $_____ for _____ months at ____ %

And on maturity I instruct
Please tick the appropriate option box

☐ On maturity the principal and interest shall be deposited into the Tripp Rolleston & Co Trust account and held on call. Tripp Rolleston & Co will contact me regarding further investment instructions

☐ On maturity the principal shall be reinvested by Tripp Rolleston & Co and the interest paid directly to my nominated bank account

☐ On maturity the principal and interest shall be re-deposited (compounded) by Tripp Rolleston & Co until they receive further instructions from myself

Interest is to be paid net of collection commission at the rate agreed by both parties.

I, acknowledge that I am aware that any loss of this investment will not be reimbursed by the Solicitors Fidelity Guarantee Fund.

Dated this …… day of …… 20…….

Signature ……

Please complete if this is a NEW authorisation or to amend details currently held by Tripp Rolleston & Co

Bank Account Name ……

Bank Account Number | | | - | | | | | - | | | | | | | | - | 0 | | |

Taxation Information

Tax Status Resident ☐ Tax Rate 17.5% Tax Rate 33% ☐

Non Resident ☐ Tax Rate 10% Tax Rate 15% ☐

IRD Number | | | | | | | | |

E-Mail Address ……

e-mail admin@tripprolleston.co.nz

www.tripprolleston.co.nz