

# Managed Funds Regular Withdrawal Form

Investment Name:
Investment Number:

My account to be credited (acceptor)													
Name of my bank													
Bank	Branch				Account						Suffix		
Amount (minimum \$20)													
Frequency		<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly						<input type="checkbox"/> Monthly <input type="checkbox"/> One-Off					
Start date													

Authorised Signature/s:	Date:

Additional Notes:

Once Complete please email to [support@Goalsgetter.co.nz](mailto:support@Goalsgetter.co.nz) with a proof of bank account document.