



**CRAIGS**<sup>®</sup>  
INVESTMENT PARTNERS

Account Name

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Account Number

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# Custodial Client Agreement

Individual, Joint or Minor Account



# Client Agreement

Please return the completed and signed Client Agreement and required documentation (including bank account and identity verification documents) to your Craigs Investment Partners adviser, as detailed below.

Please follow these steps to open your account with us:



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Investment Adviser
Date   D   D     M   M     Y   Y   Y   Y

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OFFICE USE ONLY

Client Account No.

Adviser

## Completing this Client Agreement

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You will find additional information and instructions in the left panel of each page, to help guide you through the form.

If you have any questions or need assistance, please contact your investment adviser.

## A Account Type

### THIS ACCOUNT IS FOR

Please tick the best description

- An individual       Two or more individuals       A minor (<18 years)

*Minors: If a minor (an individual under the age of 18 years) wishes to open an Account, then a parent or guardian must be the Client and complete Section B1 of the Client Agreement. Details of the minor are to be recorded in Section B2.*

Please tick which service(s) you require

- Investment Administration Service (IAS)       Managed Portfolio Service (MPS)  
 Discretionary Management Service (DIMS)  
*(DIMS requires additional forms to be completed)*

#### Services

For a description of each of these services, ask your investment adviser.

## B Client Details

### B1 Individual or Primary (First) Applicant

*This Primary Applicant will be the main point of contact for this account (Minor's Parent/Guardian)*

#### PERSONAL DETAILS

**Title** *please select one*

- Mr     Mrs     Miss     Ms     Mx     Dr     Other *specify* \_\_\_\_\_

- Gender**     Male     Female     Non Binary     Prefer not to say

**Full Name**

*First Name* \_\_\_\_\_

*Middle Name* \_\_\_\_\_

*Last Name* \_\_\_\_\_

**Preferred Salutation**

*Please complete all details and tick your preferred method of contact*

- Home Ph \_\_\_\_\_       Mobile \_\_\_\_\_  
 Work Ph \_\_\_\_\_       Post *as per mailing address*  
 Email \_\_\_\_\_

**Residential Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Postcode** | | | | |

**Mailing Address** *(please enter if different from your residential address)*

\_\_\_\_\_  
\_\_\_\_\_  
**Postcode** | | | | |

**Date of Birth** | D | D | | M | M | | Y | Y | Y | Y |

- Country of Birth**     NZ     Australia     Other *specify* \_\_\_\_\_

**Town or City of Birth** \_\_\_\_\_

#### Preferred Salutation

This is how you would like your communication addressed.

**CITIZENSHIP & RESIDENCY STATUS**

New Zealand Citizen     Australian Citizen     Other *specify* \_\_\_\_\_

If **Other** please provide a copy of your residency documentation:

Permanent Resident / Resident Visa     Work Visa  
 Do not reside in NZ     Other Visa *specify* \_\_\_\_\_



**Occupation** \_\_\_\_\_  Retired

Public Office - Have you, or an immediate family member, held a public office position in the last two years e.g. diplomat, high level judicial, military or ministerial position in New Zealand or overseas?

No     Yes *specify* \_\_\_\_\_

**PERSONAL TAX DETAILS**

Tax resident in NZ     Yes     No *specify* \_\_\_\_\_

New Zealand IRD Number    | | | | | | | | | | | | | | | |

**I am a US citizen, green card holder or a US person for US tax purposes.**

Please ensure you tick either Yes or No     Yes     No

*Please only complete the following if you are a tax resident in one or more countries other than New Zealand.*

Please confirm each country/jurisdiction in which you are a tax resident, including the US if indicated above, and provide your TIN for each country/jurisdiction.

Country/Jurisdiction of Tax Residence	TIN	If no TIN is available please select reason a, b or c from below if applicable
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please explain why you are unable to obtain a TIN if you selected reason **b** above.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If no TIN is available please provide the appropriate reason a, b or c where indicated below:

- a) the country/jurisdiction does not issue TINs to its residents
- b) you are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN above if you have selected this reason)
- c) no TIN is required (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by the jurisdiction)

Please contact your Tax Adviser if you require assistance completing this section.

**Country/Jurisdiction of Tax Residence**

**TIN** - is a tax processing number, 'Tax Identification Number'.

Dependent on the country of tax residency the 'TIN' may also be known by another name. Please see some common examples below.

**Australia TIN**

Tax File Number (TFN).

**UK TIN**

National Insurance Number (NINO) or Unique Taxpayer Reference (UTR).

**US TIN**

If you answered yes to the US question, please provide us with one of the following US Tax Identification Numbers (TIN):

- Social Security Number "SSN"
- Individual Taxpayer Identification Number "ITIN"

For further information on TINs or to find the type of tax identifier required for your country of tax residency, please see [www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/](http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/)

### Identity Verification

Craigs Investment Partners may request to sight the original of any identity verification document that has been used by you for identity verification purposes.

### Photo ID

Photo ID provided must be of a quality to enable the person's identity to be verified.

### Certified Copy

Original documents can be sighted by a Craigs Investment Partners employee.

Alternatively all identity documents must be certified by one of the following:

- Justice of the Peace (JP)
- Lawyer
- Notary Public
- NZ Chartered Accountant
- NZ Police Constable
- Member of Parliament
- Registered Medical Doctor
- Registered Teacher
- Minister of Religion.

This person certifying must not be related to you, be your spouse or partner, live at the same address as you or be involved in this Client Agreement.

Certified documents must include the full name, occupation and an original signature of the certifier and the date of certification.

Certification must have been carried out in the three months preceding presentation of the certified documents.

### Example wording to be used on certification

*"I certify this to be a true copy of the original document which I have sighted, and where it is an identity document, represents the identity of the named individual in the document; Signature, Full Name, Occupation, Date."*

### Client Portal

This is accessed via [craigsip.com/login](http://craigsip.com/login) and is available to all clients and authorised persons associated with the account i.e. accountants, Trustees, beneficial owners. It is an online tool which enables monitoring of investment performance, plus access to research reports and investment reports.

## IDENTITY AND ADDRESS VERIFICATION

Please tick which method you would like us to use to identify you:

- Electronically  Manually

- 1) **Electronically** – Please indicate below if you authorise us to verify your identity and residential address electronically. By selecting this option, you are authorising Craigs Investment Partners to use your personal information to verify your identity and residential address electronically with information held in third party databases (including the Department of Internal Affairs, NZ Transport Agency and a credit reporting agency).

- I authorise Craigs Investment Partners to electronically verify my identity and residential address. Please provide us with a copy of the document you select below - either your valid New Zealand/Australian Passport (including photo and signature pages) or New Zealand/Australian Driver Licence (both sides).

- NZ Passport  NZ Driver Licence  
 Australian Passport  Australian Driver Licence



*We will contact you if we are unable to verify your identity information electronically*

- 2) **Manually** – If you choose manual verification, you will need to provide us with certified copies of the documents listed in the Guidance Note for Manual Identity Verification (page 19).

Information provided will be handled in accordance with (i) Clauses 26-28 of the Terms and Conditions or (ii) Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).

## REPORTS & CONTRACT NOTES

Reports will be available on the Client Portal and you will receive an email notification when they are available.

Contract notes will be sent to you by email and will be available on the Client Portal.

If you would like to receive the reports or contract notes by post, please discuss this with your adviser.

## SUBSCRIPTION

### News & Views publication

A quarterly publication with topical articles and company events is available on the Client Portal. Please tick below if you would also like to receive News & Views by email and/or post.

- Email  Post

### Market Insights eNewsletter

A fortnightly email that covers current market information. Please tick if you wish to receive these.

- Email

## PERSONAL DETAILS

Title *please select one*
 Mr
  Mrs
  Miss
  Ms
  Mx
  Dr
  Other *specify* \_\_\_\_\_

 Gender
  Male
  Female
  Non Binary
  Prefer not to say

Full Name

First Name

Middle Name

Last Name

Preferred Salutation

*Please complete all details and tick your preferred method of contact*
 Home Ph \_\_\_\_\_  Mobile \_\_\_\_\_

 Work Ph \_\_\_\_\_  Post as per mailing address

 Email \_\_\_\_\_

Residential Address

\_\_\_\_\_ Postcode | | | | |

Mailing Address *(please enter if different from your residential address)*

\_\_\_\_\_ Postcode | | | | |

Date of Birth | D | D | M | M | Y | Y | Y | Y |

 Country of Birth
  NZ
  Australia
  Other *specify* \_\_\_\_\_

Town or City of Birth \_\_\_\_\_

## CITIZENSHIP &amp; RESIDENCY STATUS

 New Zealand Citizen
  Australian Citizen
  Other *specify* \_\_\_\_\_
If **Other** please provide a copy of your residency documentation:
 Permanent Resident / Resident Visa
  Work Visa

 Do not reside in NZ
  Other Visa *specify* \_\_\_\_\_

 Occupation \_\_\_\_\_  Retired

Public Office - Have you, or an immediate family member, held a public office position in the last two years e.g. diplomat, high level judicial, military or ministerial position in New Zealand or overseas?

 No
  Yes *specify* \_\_\_\_\_

## Preferred Salutation

This is how you would like your communication addressed.

Please contact your Tax Adviser if you require assistance completing this section.

**Country/Jurisdiction of Tax Residence**

**TIN** – is a tax processing number, 'Tax Identification Number'.

Dependent on the country of tax residency the 'TIN' may also be known by another name. Please see some common examples below.

**Australia TIN**

Tax File Number (TFN).

**UK TIN**

National Insurance Number (NINO) or Unique Taxpayer Reference (UTR).

**US TIN**

If you answered yes to the US question, please provide us with one of the following US Tax Identification Numbers (TIN):

- Social Security Number "SSN"
- Individual Taxpayer Identification Number "ITIN"

For further information on TINs or to find the type of tax identifier required for your country of tax residency, please see [www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/](http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/)

**PERSONAL TAX DETAILS**

Tax resident in NZ  Yes  No *specify* \_\_\_\_\_

New Zealand IRD Number | | | | | | | | | | | | | | | |

**I am a US citizen, green card holder or a US person for US tax purposes.**

Please ensure you tick either Yes or No  Yes  No

*Please only complete the following if you are a tax resident in one or more countries other than New Zealand.*

Please confirm each country/jurisdiction in which you are a tax resident, including the US if indicated above, and provide your TIN for each country/jurisdiction.

Country/Jurisdiction of Tax Residence	TIN	If no TIN is available please select reason a, b or c from below if applicable
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please explain why you are unable to obtain a TIN if you selected reason **b** above.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If no TIN is available please provide the appropriate reason a, b or c where indicated below:

- a) the country/jurisdiction does not issue TINs to its residents
- b) you are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN above if you have selected this reason)
- c) no TIN is required (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by the jurisdiction)



### Identity Verification

Craigs Investment Partners may request to sight the original of any identity verification document that has been used by you for identity verification purposes.

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### Certified Copy

Original documents can be sighted by a Craigs Investment Partners employee.

Alternatively all identity documents must be certified by one of the following:

- Justice of the Peace (JP)
- Lawyer
- Notary Public
- NZ Chartered Accountant
- NZ Police Constable
- Member of Parliament
- Registered Medical Doctor
- Registered Teacher
- Minister of Religion.

This person certifying must not be related to you, be your spouse or partner, live at the same address as you or be involved in this Client Agreement.

Certified documents must include the full name, occupation and an original signature of the certifier and the date of certification.

Certification must have been carried out in the three months preceding presentation of the certified documents.

### Example wording to be used on certification

"I certify this to be a true copy of the original document which I have sighted, and where it is an identity document, represents the identity of the named individual in the document; Signature, Full Name, Occupation, Date."

### Client Portal

This is accessed via [craigsip.com/login](http://craigsip.com/login) and is available to all clients and authorised persons associated with the account i.e. accountants, Trustees, beneficial owners. It is an online tool which enables monitoring of investment performance, plus access to research reports and investment reports.

## IDENTITY AND ADDRESS VERIFICATION

Please tick which method you would like us to use to identify you:

- Electronically  Manually

1) **Electronically** – Please indicate below if you authorise us to verify your identity and residential address electronically. By selecting this option, you are authorising Craigs Investment Partners to use your personal information to verify your identity and residential address electronically with information held in third party databases (including the Department of Internal Affairs, NZ Transport Agency and a credit reporting agency).

- I authorise Craigs Investment Partners to electronically verify my identity and residential address. Please provide us with a copy of the document you select below - either your valid New Zealand/Australian Passport (including photo and signature pages) or New Zealand/Australian Driver Licence (both sides).

- NZ Passport  NZ Driver Licence  
 Australian Passport  Australian Driver Licence



*We will contact you if we are unable to verify your identity information electronically*

2) **Manually** – If you choose manual verification, you will need to provide us with certified copies of the documents listed in the Guidance Note for Manual Identity Verification (page 19).

Information provided will be handled in accordance with (i) Clauses 26-28 of the Terms and Conditions or (ii) Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).

## SUBSCRIPTION

### News & Views publication

A quarterly publication with topical articles and company events is available on the Client Portal. Please tick below if you would also like to receive News & Views by email and/or post.

- Email  Post

### Market Insights eNewsletter

A fortnightly email that covers current market information. Please tick if you wish to receive these.

- Email

PERSONAL DETAILS

Title *please select one*

Mr  Mrs  Miss  Ms  Mx  Dr  Other *specify* \_\_\_\_\_

Gender  Male  Female  Non Binary  Prefer not to say

Full Name

First Name Middle Name Last Name

Preferred Salutation

Please complete all details and tick your preferred method of contact

Home Ph  Mobile

Work Ph  Post as per mailing address

Email

Residential Address

Postcode | | | | |

Mailing Address *(please enter if different from your residential address)*

Postcode | | | | |

Date of Birth | D | D | | M | M | | Y | Y | Y | Y |

Country of Birth  NZ  Australia  Other *specify* \_\_\_\_\_

Town or City of Birth \_\_\_\_\_

Please provide a copy of your birth certificate.



CITIZENSHIP & RESIDENCY STATUS

New Zealand Citizen  Australian Citizen  Other *specify* \_\_\_\_\_

If **Other** please provide a copy of your residency documentation:

Permanent Resident / Resident Visa  Work Visa



Do not reside in NZ  Other Visa *specify* \_\_\_\_\_

Occupation  Retired

Public Office - Have you, or an immediate family member, held a public office position in the last two years e.g. diplomat, high level judicial, military or ministerial position in New Zealand or overseas?

No  Yes *specify* \_\_\_\_\_

Preferred Salutation  
This is how you would like your communication addressed.

Please contact your Tax Adviser if you require assistance completing this section.

**Country/Jurisdiction of Tax Residence**

**TIN** – is a tax processing number, 'Tax Identification Number'.

Dependent on the country of tax residency the 'TIN' may also be known by another name. Please see some common examples below.

**Australia TIN**

Tax File Number (TFN).

**UK TIN**

National Insurance Number (NINO) or Unique Taxpayer Reference (UTR).

**US TIN**

If you answered yes to the US question, please provide us with one of the following US Tax Identification Numbers (TIN):

- Social Security Number "SSN"
- Individual Taxpayer Identification Number "ITIN"

For further information on TINs or to find the type of tax identifier required for your country of tax residency, please see [www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/](http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/)

**PERSONAL TAX DETAILS**

**Tax resident in NZ**  Yes  No *specify* \_\_\_\_\_

**New Zealand IRD Number** | | | | | | | | | | | | | | | | | | | | | |

**I am a US citizen, green card holder or a US person for US tax purposes.**

**Please ensure you tick either Yes or No**  Yes  No

*Please only complete the following if you are a tax resident in one or more countries other than New Zealand.*

Please confirm each country/jurisdiction in which you are a tax resident, including the US if indicated above, and provide your TIN for each country/jurisdiction.

Country/Jurisdiction of Tax Residence	TIN	If no TIN is available please select reason a, b or c from below if applicable
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please explain why you are unable to obtain a TIN if you selected reason **b** above.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If no TIN is available please provide the appropriate reason a, b or c where indicated below:

- a) the country/jurisdiction does not issue TINs to its residents
- b) you are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN above if you have selected this reason)
- c) no TIN is required (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by the jurisdiction)

## C Account Information

### C1 Authorised Person/Power Of Attorney

#### Authorised Person

Have you appointed an Authorised Person to act on your behalf?

Yes (please ask the person to complete Section H)  No

#### Power of Attorney

If you appoint an Attorney to act on your behalf we will need them to complete an additional form. An Attorney must provide Craigs Investment Partners with a separate Certificate of Non-Revocation of Power of Attorney on every occasion they instruct on the account.

Please provide the full name of any Attorney who is acting on this account on your behalf:

#### Full Name

First Name

Middle Name

Last Name

Capacity

#### Full Name

First Name

Middle Name

Last Name

Capacity

#### Full Name

First Name

Middle Name

Last Name

Capacity

### C2 Authorisation to Instruct on the Account

Please select one of the following options

**Any one authorised person can instruct on the account**

**Multiple authorised persons** – Please indicate below which persons from Section C, and how many, are required to jointly instruct on the account e.g three authorised persons, any two can instruct:

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As an NZX Market Participant, Craigs Investment Partners Limited is prohibited under the NZX Participant Rules from buying or selling securities for a Prescribed Person of any other NZX Firm.

### C3 NZX Prescribed Person Confirmation

A Prescribed Person of an NZX Market Participant is any one of the following:

- a) an Employee of that NZX Market Participant;
- b) the spouse or de facto partner and dependent children of an Employee of that Market Participant.

*Employees of an NZX Market Participant include directors, partners, full and part-time employees, temporary and fixed-term contractors, secondees and interns.*

#### NZX PRESCRIBED PERSON DETAILS

Are you or any person associated with this account an Employee of an NZX Market Participant (including Craigs Investment Partners)?

Yes  No

If yes, please complete the details below:

**NZX Market Participant Employee Name** \_\_\_\_\_

**NZX Firm** \_\_\_\_\_

**Position** \_\_\_\_\_

Are you, or anyone associated with this account, the spouse, de facto partner or dependent child of an Employee of an NZX Market Participant (including Craigs Investment Partners)?

Yes  No

If yes, please complete the details below:

**Name** \_\_\_\_\_

**Relationship to NZX Market Participant Employee** \_\_\_\_\_

**Name** \_\_\_\_\_

**Relationship to NZX Market Participant Employee** \_\_\_\_\_

### C4 Listed Entity Director/Officer Details

Are you or any person associated with this account a Director or Officer of an entity that has securities listed on any Recognised Securities Exchange?

Yes  No

If yes, please complete the details below:

#### LISTED ENTITY DIRECTOR/OFFICER DETAILS

**Director/Officer Name** \_\_\_\_\_

**Relationship to Listed Entity** \_\_\_\_\_

**Listed Entity Name** \_\_\_\_\_

**Registered Exchange** \_\_\_\_\_

**Director/Officer Name** \_\_\_\_\_

**Relationship to Listed Entity** \_\_\_\_\_

**Listed Entity Name** \_\_\_\_\_

**Registered Exchange** \_\_\_\_\_

C5

## Source of Funds or Wealth and Nature and Purpose of the Business Relationship

### We are required to obtain:

- > Information relating to the original source of wealth or the source of funds for the account.
- > Information on the nature and purpose of the relationship between ourselves and clients to allow us to understand our clients' activities over time and to anticipate our clients' transactions and activities.

### SOURCE OF FUNDS OR WEALTH

Please select from the list below and provide a detailed description of the origin of the Wealth or the Funds of the Account.



**Employment earnings** *(please specify the nature and period of employment)*

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**Sale of a property** *(please specify the date of sale, type of property and location)*

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**Inheritance** *(please specify the date and type of inheritance)*

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**Income from a company** *(please specify the company, amount, type and frequency of payments)*

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**Deposit(s) from a family bank account** *(please specify the amount, type and frequency of payments)*

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**Other** *(please provide a detailed description of the activity that generated the Account's wealth or funds)*

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### NATURE AND PURPOSE OF RELATIONSHIP

We are required to obtain information on the nature and purpose of the relationship between ourselves and clients to allow us to understand our clients' activities over time and to anticipate our clients' transactions and activities. Please select from the list below, those that best describe the nature and purpose of your investment:

- To receive investment advice
- To help grow my savings
- To save for my retirement
- To obtain access to new issues
- To manage an inheritance
- To sell shares
- To generate income
- To obtain access to international securities
- Other *(please provide as much detail as possible)*

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## E Tax Residency Self-Certification Guidance

The OECD's Common Reporting Standard ("CRS") and the US Foreign Account Tax Compliance Act ("FATCA") have both been incorporated into New Zealand tax law, as part of a broader framework for the exchange of tax information. The legislation requires Craigs Investment Partners to collect and report certain information about our clients' personal and financial information, depending on whether a client is tax resident in a jurisdiction other than New Zealand.

Each jurisdiction has its own rules for defining tax residence, and jurisdictions have provided information on how to determine if you are resident in the jurisdiction on the OECD Automatic Exchange of Information portal. In general, a person will be tax residence in the jurisdiction in which they ordinarily reside. Special circumstances may cause you to be tax resident elsewhere or tax resident in more than one jurisdiction at the same time (dual residency). If you are a US citizen or tax resident under US law, you should indicate that you are a US tax resident on this form and you may also need to fill in an IRS W-9 form. For more information on tax residence, please consult your tax adviser or the information at the OECD Automatic Exchange of Information portal.

If the account holder or a controlling person is tax resident in a jurisdiction or jurisdictions other than New Zealand, we may be legally obliged to pass on certain personal information in this form and information on their financial accounts to the Inland Revenue Department. They may exchange this information with the tax authority of each foreign jurisdiction in which tax residency resides. The foreign tax authority may use this information for their review and audit purposes. In return, the Inland Revenue Department receives from foreign tax authorities similar information relating to New Zealand tax residents.

As a financial institution, we are not allowed to give tax advice. Your tax adviser may be able to assist you in answering specific questions on this Client Agreement. Your domestic tax authority can provide guidance regarding how to determine your tax status.

You can also find out more, including a list of jurisdictions that have agreed to automatically exchange tax information, along with details about the information being requested, on the OECD Automatic Exchange of Information portal: [www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/](http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/) and the Inland Revenue Department website: [www.ird.govt.nz/international-tax/exchange-of-information/crs/aeoi-and-crs](http://www.ird.govt.nz/international-tax/exchange-of-information/crs/aeoi-and-crs)

## F Client Undertakings and Signatures

### F1 Undertakings

**I/We request that Craigs Investment Partners accept me/us as a Client and open an Account in my/our name(s).**

**I/We confirm that I/we:**

1. Have received and read the Craigs Investment Partners Disclosure Statements for my/our Craigs Investment Partners Adviser(s).
2. Have received a copy of the Craigs Investment Partners Terms and Conditions (the “Terms and Conditions”) or Wholesale Terms and Conditions (as applicable). Words beginning with a capital letter used in this Client Agreement and not otherwise defined have the same meaning as used in the Terms and Conditions or Wholesale Terms and Conditions (as applicable).
3. Agree to be bound by the Terms and Conditions or Wholesale Terms and Conditions (as applicable).
4. Have read and understood (i) the risk warnings set out in Clause 16 of the Terms and Conditions and the use and disclosure of personal information provisions set out in Clauses 26-28 of the Terms and Conditions or (ii) the risk warnings set out in Clause 15 of the Wholesale Terms and Conditions and the use and disclosure of personal information provisions set out in Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).
5. Agree to be bound by any terms and conditions included within the Terms and Conditions or Wholesale Terms and Conditions (as applicable) relating to a Nominee holding securities on my/our behalf in the course of the provision of the Services.

**I/We acknowledge that:**

1. Where the Terms and Conditions are deemed to govern my relationship with Craigs Investment Partners, the Client will be treated as a Retail Investor unless I/we certify the Client to be a “Wholesale Investor” for the purposes of the Financial Markets Conduct Act 2013, where such certification is approved by Craigs Investment Partners in writing.
2. Where the Wholesale Terms and Conditions are deemed to govern my relationship with Craigs Investment Partners, the Client will be treated as a Wholesale Investor for the purposes of the Financial Markets Conduct Act 2013.
3. The Financial Information is required by Craigs Investment Partners to enable its investment advisers to determine the suitability of the advice being provided.
4. If I/we decline to provide some or all Financial Information required by Craigs Investment Partners, I/we accept that Craigs Investment Partners may not be able to provide me/us with advice that takes into account my financial situation, needs, goals or risk tolerance or it may be limited in the extent that it can do so.
5. I/We acknowledge that If I/we do not instruct Craigs Investment Partners and/or its investment advisers to take into account my/our financial situation, needs, goals or risk tolerance when providing advice, I/we accept that the advice will not do so and I/we are aware of the limitations of this type of advice.
6. Craigs Investment Partners may register a Financing Statement over the Financial Products at the Personal Property Securities Register if I/we do not pay the purchase price for the Securities to Craigs Investment Partners by the due date for payment.
7. I/We must obtain the written consent of a nominee that is not associated with Craigs Investment Partners, before Craigs Investment Partners will complete a Client Outward Transfer (as that term is defined in the NZX Participant Rules) on my/our behalf into the name of that nominee.
8. Where I/we have provided information about any other individual, I/we will make that individual aware of (i) the provisions of Clauses 26-28 of the Terms and Conditions or (ii) the provisions of Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).
9. Communications that Craigs Investment Partners send to us by way of email or other electronic means will not be encrypted.
10. I/We understand that the information supplied by me/us is covered by the Terms and Conditions or Wholesale Terms and Conditions (as applicable) governing my relationship with Craigs Investment Partners setting out how Craigs Investment Partners may use and share the information supplied by me/us.

11. Without limiting the Terms and Conditions or Wholesale Terms and Conditions (as applicable), I/we acknowledge that the information contained in this Client Agreement and in relation to any Reportable Account(s) may be provided to the Inland Revenue Department and exchanged with tax authorities of another country/ jurisdiction or countries/jurisdictions in which I/we may be a tax resident pursuant to intergovernmental agreements to exchange financial account information.
12. Without limiting the Terms and Conditions or Wholesale Terms and Conditions (as applicable), I/we confirm that if Electronic Identity and Address Verification was selected in this form, I/we consent to Craigs Investment Partners Limited using the personal information that I/we have provided to verify my/our identity electronically and where necessary disclosing the information to external and independent agencies for the purpose of matching my/our information with identification information held in third party databases including the Department of Internal Affairs, the New Zealand Transport Authority and a credit reporting agency.
13. I/We undertake to advise Craigs Investment Partners within 30 days of any change in circumstances which:
  - a. affects the tax residency status of any person associated with this account; or
  - b. causes the information contained herein to become incorrect or incomplete; and, if so, to provide Craigs Investment Partners with a suitably updated self-certification and declaration within 60 days of such change in circumstances.
14. I/We certify that I am/we are the applicant(s) (or am/are authorised to sign and provide information on behalf of the applicant(s)).
15. If I am/we are applying to open an Account on behalf of a Minor, I/we will be authorised to operate the Account until the Minor reaches the age of 18.

**I/We consent to:**

1. Any Authorised Person(s) or Attorney(s) appointed by me/us acting on my/our behalf with Craigs Investment Partners.
2. Receiving contract notes by email where I/we have selected this option in this Client Agreement.
3. Craigs Investment Partners retaining the Client's Authorisation Code in encrypted format pursuant to Clause 7 of the Terms and Conditions or Clause 7 of the Wholesale Terms and Conditions (as applicable).
4. My/our orders on behalf of the Client being put to market at the careful discretion of Craigs Investment Partners pursuant to Clause 8 of the Terms and Conditions or Clause 8 of the Wholesale Terms and Conditions (as applicable).

**Please read the following:**

The purpose of this subsection is to ensure that you are aware of and have understood certain important information prior to requesting that a Cash Management Account is opened and funds are held on your behalf by Craigs Investment Partners Cash Management Nominees Limited with ANZ Bank New Zealand Limited, or any successor or other registered banks selected by Craigs Investment Partners Limited.

1. I/We acknowledge that I/we have read and understood the information contained in the Terms and Conditions or the Wholesale Terms and Conditions (as applicable) in relation to the Cash Management Account to my/our satisfaction.
2. I/We understand the manner in which the fees will be applied to my/our investment, and commission will be paid to Craigs Investment Partners Cash Management Nominees Limited. Further information on the fees and commission can be found in the Craigs Investment Partners Disclosure Statement for my/our Craigs Investment Partners Adviser(s) and current rates of gross interest and commission may be obtained from my/our Craigs Investment Partners Adviser.

## F2 Signatures

### Instructions for Signing

All applicants or their respective Attorneys (if applicable) must sign this Client Agreement (except Minors) and indicate their capacity (i.e. Self; Parent or Guardian for a Minor; Attorney for <Name of Applicant>).

**Where a person is signing as Attorney for the Client**, a copy of the Power of Attorney and Certificate of Non-Revocation of Power of Attorney must be completed and returned to Craigs Investment Partners with this Client Agreement.



**Full Name**

*First Name*

*Middle Name*

*Last Name*

---

Capacity

---

Signature

---

Date | D | D | M | M | Y | Y | Y | Y |

**Full Name**

*First Name*

*Middle Name*

*Last Name*

---

Capacity

---

Signature

---

Date | D | D | M | M | Y | Y | Y | Y |

You are required to return the Client Agreement within one month from the date of signing, otherwise we may, at our sole discretion require you to complete a new Client Agreement or provide additional documentation to verify information in the Client Agreement.

You will become a client once Craigs Investment Partners Limited, Custodial Services Limited and Craigs Investment Partners Cash Management Nominees Limited accept your application.

# G

## Manual Identity Verification Requirements

### The Certifier:

- must be at least 16 years old
- cannot be your spouse or partner
- cannot be related to you
- cannot live at the same address as you
- cannot be involved in the transaction or business requiring certification.

### Photo ID

Photo ID provided must be of a quality to enable the person's identity to be verified.

### Example wording to be used on certification

*"I certify this to be a true copy of the original document which I have sighted, and where it is an identity document, represents the identity of the named individual in the document; Signature, Full Name, Occupation, Date."*

Identification documents provided must be current at the time of presentation i.e. not expired where an expiry date is applicable to the form of identification.

### Certification

Original documents can be sighted and verified by a Craigs Investment Partners employee.

Alternatively all identity documents must be certified by one of the following: Justice of the Peace (JP), Lawyer, Notary Public, NZ Chartered Accountant, NZ Police Constable, Member of Parliament, Registered Medical Doctor, Registered Teacher or Minister of Religion.

This person certifying must not be related to you, be your spouse or partner, live at the same address as you or be involved in this Client Agreement.

Certified documents must include the full name, occupation and an original signature of the certifier and the date of certification. Certification must have been carried out in the three months preceding presentation of the certified documents. The certifier must sight the original documents and make a statement that the documents provided are a true copy and represent the identity of the named individual.

### PROOF OF IDENTITY

Please provide the following documents:

#### Option 1

A certified/verified photocopy of one of the following:



- New Zealand or overseas passport containing name, date of birth, photograph and signature, the document must not be cropped in anyway
- A national identity card containing name, date of birth, photograph and signature

OR

#### Option 2

A certified copy of a New Zealand or Australian Driver Licence (both sides if expiry is displayed on the back) AND a certified/verified copy of one of the following:



- New Zealand full birth certificate
- Certificate of New Zealand or overseas citizenship
- Credit/debit/eftpos card issued by a registered bank that contains client's name and signature - CVC/CVV must not be visible
- Bank/Credit Card statement in client's name issued by a registered bank in 3 months before the application (if address has changed - this can still be used as second form of ID but not for proof of current address)
- A statement issued by a government agency in the 12 months before date of the application (e.g. IRD; Studylink; ACC) (**NOT** a Rates or Utilities bill)
- SuperGold card

OR

#### Option 3

A certified/verified copy of: New Zealand Firearms Licence AND a certified/verified copy of one of the following:



- Credit/debit card/eftpos card issued by a registered bank that contains client's name and signature
- New Zealand or Australian Driver Licence
- Gold card (only with signature)

#### For Minors

A certified/verified copy of:

- Birth certificate/court appointed guardianship

## PROOF OF RESIDENTIAL ADDRESS

A copy of one of the following issued within the last twelve months that includes your name and address:



- Utilities bill
- Rates bill
- Bank account statement
- A statement issued to you by a government agency e.g. Inland Revenue

## H Authorised Person

### H1 Individual as an Authorised Person

#### PERSONAL DETAILS

**Title** *please select one*

Mr  Mrs  Miss  Ms  Mx  Dr  Other *specify* \_\_\_\_\_

**Gender**  Male  Female  Non Binary  Prefer not to say

**Full Name**

*First Name*

*Middle Name*

*Last Name*

**Preferred Salutation**

*Please complete all details and tick your preferred method of contact*

Home Ph  Mobile

Work Ph  Post *as per mailing address*

Email

**Residential Address**

\_\_\_\_\_  
\_\_\_\_\_  
**Postcode** | | | | |

**Mailing Address** *(please enter if different from your residential address)*

\_\_\_\_\_  
\_\_\_\_\_  
**Postcode** | | | | |

**Date of Birth** | D | D | | M | M | | Y | Y | Y | Y |

**Country of Birth**  NZ  Australia  Other *specify* \_\_\_\_\_

**Town or City of Birth** \_\_\_\_\_

#### CITIZENSHIP & RESIDENCY STATUS

New Zealand Citizen  Australian Citizen  Other *specify* \_\_\_\_\_

If **Other** please provide a copy of your residency documentation:

Permanent Resident / Resident Visa  Work Visa

Do not reside in NZ  Other Visa *specify* \_\_\_\_\_



**Occupation**

Retired

Public Office - Have you, or an immediate family member, held a public office position in the last two years e.g. diplomat, high level judicial, military or ministerial position in New Zealand or overseas?

No  Yes *specify* \_\_\_\_\_

#### Preferred Salutation

This is how you would like your communication addressed.

Please contact your Tax Adviser if you require assistance completing this section.

**Country/Jurisdiction of Tax Residence**

**TIN** – is a tax processing number, 'Tax Identification Number'.

Dependent on the country of tax residency the 'TIN' may also be known by another name. Please see some common examples below.

**Australia TIN**

Tax File Number (TFN).

**UK TIN**

National Insurance Number (NINO) or Unique Taxpayer Reference (UTR).

**US TIN**

If you answered yes to the US question, please provide us with one of the following US Tax Identification Numbers (TIN):

- Social Security Number "SSN"
- Individual Taxpayer Identification Number "ITIN"

For further information on TINs or to find the type of tax identifier required for your country of tax residency, please see [www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/](http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/)

**PERSONAL TAX DETAILS**

**Tax resident in NZ**  Yes  No *specify*

**New Zealand IRD Number** | | | | | | | | | |

**I am a US citizen, green card holder or a US person for US tax purposes.**

**Please ensure you tick either Yes or No**  Yes  No

*Please only complete the following if you are a tax resident in one or more countries other than New Zealand.*

Please confirm each country/jurisdiction in which you are a tax resident, including the US if indicated above, and provide your TIN for each country/jurisdiction.

Country/Jurisdiction of Tax Residence	TIN	If no TIN is available please select reason a, b or c from below if applicable
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please explain why you are unable to obtain a TIN if you selected reason **b** above.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If no TIN is available please provide the appropriate reason a, b or c where indicated below:

- a) the country/jurisdiction does not issue TINs to its residents
- b) you are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN above if you have selected this reason)
- c) no TIN is required (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by the jurisdiction)



### Identity Verification

Craigs Investment Partners may request to sight the original of any identity verification document that has been used by you for identity verification purposes.

### Photo ID

Photo ID provided must be of a quality to enable the person's identity to be verified.

### Certified Copy

Original documents can be sighted by a Craigs Investment Partners employee.

Alternatively all identity documents must be certified by one of the following:

- Justice of the Peace (JP)
- Lawyer
- Notary Public
- NZ Chartered Accountant
- NZ Police Constable
- Member of Parliament
- Registered Medical Doctor
- Registered Teacher
- Minister of Religion.

This person certifying must not be related to you, be your spouse or partner, live at the same address as you or be involved in this Client Agreement.

Certified documents must include the full name, occupation and an original signature of the certifier and the date of certification.

Certification must have been carried out in the three months preceding presentation of the certified documents.

### Example wording to be used on certification

"I certify this to be a true copy of the original document which I have sighted, and where it is an identity document, represents the identity of the named individual in the document; Signature, Full Name, Occupation, Date."

### Client Portal

This is accessed via [craigsip.com/login](http://craigsip.com/login) and is available to all clients and authorised persons associated with the account i.e. accountants, Trustees, beneficial owners. It is an online tool which enables monitoring of investment performance, plus access to research reports and investment reports.

## IDENTITY AND ADDRESS VERIFICATION

Please tick which method you would like us to use to identify you:

- Electronically  Manually

1) **Electronically** – Please indicate below if you authorise us to verify your identity and residential address electronically. By selecting this option, you are authorising Craigs Investment Partners to use your personal information to verify your identity and residential address electronically with information held in third party databases (including the Department of Internal Affairs, NZ Transport Agency and a credit reporting agency).

- I authorise Craigs Investment Partners to electronically verify my identity and residential address. Please provide us with a copy of the document you select below - either your valid New Zealand/Australian Passport (including photo and signature pages) or New Zealand/Australian Driver Licence (both sides).

- NZ Passport  NZ Driver Licence  
 Australian Passport  Australian Driver Licence



*We will contact you if we are unable to verify your identity information electronically*

2) **Manually** – If you choose manual verification, you will need to provide us with certified copies of the documents listed in the Guidance Note for Manual Identity Verification (page 19).

Information provided will be handled in accordance with (i) Clauses 26-28 of the Terms and Conditions or (ii) Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).

## SUBSCRIPTION

### News & Views publication

A quarterly publication with topical articles and company events is available on the Client Portal. Please tick below if you would also like to receive News & Views by email and/or post.

- Email  Post

### Market Insights eNewsletter

A fortnightly email that covers current market information. Please tick if you wish to receive these.

- Email

## H2 NZX Prescribed Person Confirmation

*As an NZX Market Participant, Craigs Investment Partners Limited is prohibited under the NZX Participant Rules from buying or selling securities for a Prescribed Person of any other NZX Firm.*

A Prescribed Person of an NZX Market Participant is any one of the following:

- a) an Employee of that NZX Market Participant;  
b) the spouse or de facto partner and dependent children of an Employee of that Market Participant.

*Employees of an NZX Market Participant include directors, partners, full and part-time employees, temporary and fixed-term contractors, secondees and interns.*

Are you an Employee of an NZX Market Participant (including Craigs Investment Partners)?

- Yes  No

If yes, please complete the details in Section C3.

Are you, or anyone associated with this account, the spouse, de facto partner or dependent child of an Employee of an NZX Market Participant (including Craigs Investment Partners)?

- Yes  No

If yes, please complete the details in Section C3.

### Authorised Person Undertakings and Signatures

**As an Authorised Person, I confirm that I:**

1. Have authority to act on the account named in Section B.
2. Have received and read the Craigs Investment partners Disclosure Statements for the Client's Craigs Investment Partners Adviser(s).
3. Have received a copy of the Craigs Investment Partners Terms and Conditions (the "Term and Conditions") or the Craigs Investment Partners Wholesale Terms and Conditions (the "Wholesale Terms and Conditions") (as applicable).
4. Have read and understood the Terms and Conditions or the Wholesale Terms and Conditions (as applicable).
5. Agree to be bound by the Terms and Conditions or the Wholesale Terms and Conditions (as applicable) relating to a Nominee holding Custodial Investments on behalf of the Client.
6. Have read and understood (i) the risk warnings set out in Clause 16 of the Terms and Conditions and the use and disclosure of personal information provisions set out in Clauses 26-28 of the Terms and Conditions or (ii) the risk warnings set out in Clause 15 of the Wholesale Terms and Conditions and the use and disclosure of personal information provisions set out in Clauses 25-27 of the Wholesale Terms and Conditions (as applicable).
7. Without limiting the Terms and Conditions or the Wholesale Terms and Conditions (as applicable), I acknowledge that the information contained in this form and in relation to any Reportable Account(s) may be provided to the Inland Revenue Department and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which I may be a tax resident pursuant to intergovernmental agreements to exchange financial account information.
8. Without limiting the Terms and Conditions or the Wholesale Terms and Conditions (as applicable), I confirm that if Electronic Identity and Address Verification was selected in this form, I consent to Craigs Investment Partners using the personal information that I have provided to verify my identity electronically and where necessary disclosing the information to external and independent agencies for the purpose of matching my information with identification information held in third party databases including the Department of Internal Affairs, the New Zealand Transport Authority and a credit reporting agency.
9. I undertake to advise Craigs Investment Partners within 30 days of any change in circumstances which:
  - a. affects the tax residency status of any person associated with this account; or
  - b. causes the information contained herein to become incorrect or incomplete, and, if so, to provide Craigs Investment Partners with a suitably updated self-certification and declaration within 60 days of such change in circumstances.

**AUTHORISED PERSON SIGNATURE**

**Full Name**

*First Name*

*Middle Name*

*Last Name*

\_\_\_\_\_

Capacity

Signature

Date

| D | D | | M | M | | Y | Y | Y | Y |



# CRAIGS®

INVESTMENT PARTNERS

## HEAD OFFICE - TAURANGA

Craigs Investment Partners House  
158 Cameron Road  
PO Box 13155, Tauranga 3141  
E. [headoffice@craigsip.com](mailto:headoffice@craigsip.com)

## KERIKERI

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14 Hobson Avenue  
PO Box 841, Kerikeri 0245  
P. 09 407 7926 F. 09 407 7429  
E. [kerikeri@craigsip.com](mailto:kerikeri@craigsip.com)

## WHANGAREI

1 Robert Street  
PO Box 573, Whangarei 0140  
P. 09 438 1988 F. 09 438 5167  
E. [whangarei@craigsip.com](mailto:whangarei@craigsip.com)

## AUCKLAND

Level 32, Vero Centre  
48 Shortland Street  
PO Box 1196, Auckland 1140  
P. 09 919 7400 F. 09 303 2520  
E. [auckland@craigsip.com](mailto:auckland@craigsip.com)

## HAMILTON

Level 4, PwC Centre  
Cnr Anglesea & Ward Streets  
PO Box 1282, Hamilton 3240  
P. 07 838 1818 F. 07 838 0828  
E. [hamilton@craigsip.com](mailto:hamilton@craigsip.com)

## TAURANGA

Craigs Investment Partners House  
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E. [tauranga@craigsip.com](mailto:tauranga@craigsip.com)

## ROTORUA

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1196 Whakaue Street  
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P. 07 348 1860 F. 07 348 1863  
E. [rotorua@craigsip.com](mailto:rotorua@craigsip.com)

## GISBORNE

66a Reads Quay  
PO Box 153, Gisborne 4040  
P. 06 868 1155 F. 06 868 1154  
E. [gisborne@craigsip.com](mailto:gisborne@craigsip.com)

## HAVELOCK NORTH

Level 1, 15 Joll Road  
PO Box 8262, Havelock North 4157  
P. 06 826 2500 F. 06 826 2501  
E. [havelocknorth@craigsip.com](mailto:havelocknorth@craigsip.com)

## NEW PLYMOUTH

Craigs Investment Partners House  
9 Young Street  
PO Box 8011, New Plymouth 4340  
P. 06 759 0015 F. 06 759 0016  
E. [newplymouth@craigsip.com](mailto:newplymouth@craigsip.com)

## WHANGANUI

17 Drews Avenue  
PO Box 63, Whanganui 4541  
P. 06 349 0030 F. 06 348 5523  
E. [whanganui@craigsip.com](mailto:whanganui@craigsip.com)

## PALMERSTON NORTH

First Floor  
Cnr Broadway Avenue & Vivian Street  
PO Box 1543, Palmerston North 4440  
P. 06 953 3460 F. 06 953 0640  
E. [palmerstonnorth@craigsip.com](mailto:palmerstonnorth@craigsip.com)

## WELLINGTON

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E. [wellington@craigsip.com](mailto:wellington@craigsip.com)

## BLLENHEIM

2 Alfred Street  
PO Box 678, Blenheim 7240  
P. 03 577 7410 F. 03 577 7440  
E. [blenheim@craigsip.com](mailto:blenheim@craigsip.com)

## NELSON

9 Buxton Square  
PO Box 772, Nelson 7040  
P. 03 744 0100 F. 03 744 0101  
E. [nelson@craigsip.com](mailto:nelson@craigsip.com)

## CHRISTCHURCH

Craigs Investment Partners House  
Level 3, 76 Victoria Street  
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P. 03 379 3433 F. 03 379 5687  
E. [christchurch@craigsip.com](mailto:christchurch@craigsip.com)

## QUEENSTOWN

Craigs Investment Partners House  
Level 3, Five Mile Centre  
Grant Road, Frankton  
PO Box 2487, Wakatipu  
Queenstown 9349  
P. 03 901 0170 F. 03 901 0179  
E. [queenstown@craigsip.com](mailto:queenstown@craigsip.com)

## DUNEDIN

Level 4, 229 Moray Place  
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P. 03 477 5900 F. 03 477 6743  
E. [dunedin@craigsip.com](mailto:dunedin@craigsip.com)

## GORE

120 Main Street  
PO Box 317, Gore 9740  
P. 03 208 9310 F. 03 208 4161  
E. [gore@craigsip.com](mailto:gore@craigsip.com)

## INVERCARGILL

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E. [invercargill@craigsip.com](mailto:invercargill@craigsip.com)

0800 272 442 / [craigsip.com](http://craigsip.com)

Craigs Investment Partners Limited is a NZX Participant firm. Adviser Disclosure Statements are available on request and free of charge. The Craigs Investment Partners Limited Financial Advice Provider Disclosure Statement can be viewed at [craigsip.com/tcs](http://craigsip.com/tcs). Please visit [craigsip.com](http://craigsip.com)