

**DID YOU KNOW?**

Changes to your beneficiaries can be made by signing in to [nzfire.super@mercercor.com](mailto:nzfire.super@mercercor.com) and selecting the 'Beneficiaries' tab.



## CHANGE OR NOMINATE BENEFICIARY FORM

Name: ..... Title: Mr / Mrs / Ms / Miss  
Surname Given names (Please circle one)

Home address: .....

Member no:..... IRD no: ..... Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Email address: .....

I advise that, if I die, I would like the Trustee to pay my benefit from FireSuper (excluding any Complying Fund Section balance) to the person/s shown below. If more than one person is shown, I would like the benefit to be shared in the proportions indicated. I understand that by law any Complying Fund Section balance must be paid to my estate.

**Please note:**

You may nominate any person or people to whom you would like your benefit paid. You may also nominate your personal representatives who are the executors or administrators of your Will or estate.

While the Trustee will take your wishes into account, it does have absolute discretion in deciding to whom and in what proportions the benefit is paid.

**BENEFICIARY DETAILS:**

1. Name: .....  
Address: .....  
Relationship: ..... Proportion of benefit: .....%\*

2. Name: .....  
Address: .....  
Relationship: ..... Proportion of benefit: .....%\*

3. Name: .....  
Address: .....  
Relationship: ..... Proportion of benefit: .....%\*

☐ My personal representatives: ..... Proportion of benefit: .....%\*

**\*The percentages you nominate must total 100%.**

I declare that this nomination revokes any previous nomination made by me.

Signature..... Date.....

**Send your completed form and supporting information (if applicable) to:**

**Post:** The Administrator, FireSuper  
Mercer (N.Z.) Limited, PO Box 1849 Wellington 6140.  
**Email:** [nzfire.super@mercercor.com](mailto:nzfire.super@mercercor.com)