



From: Michael Cave (FSP19443)
Authorised Financial Adviser
Cave Financial Consulting Limited

Phone: 09-302-7310
Mobile: 021-776-832
Email: michael@cavefinancial.co.nz

Date	
To	
Attention	

I/We (full name/s):

wish to appoint Michael Cave as my/our advisor on my Policy/ies/KiwiSaver Fund/s.
The Policy/Membership number/s is/are:

Letter of Authority

Pursuant to the Official Information Act 1982 and the Privacy Act 1993, I/we hereby give authority to Michael Cave of Cave Financial Consulting Limited, the right to source data on me/us, that I/we hold with your company. Would you please release to him at his request the data that he requires for his use and my/our benefit.

Letter of Appointment

As per the details above, I/we hereby wish to appoint Michael Cave of Cave Financial Consulting Limited as my/our agent for all Life Insurance, Health insurance, KiwiSaver, Savings, Investment and Superannuation business that I/we hold with your company.

Signed

Date of Birth

Date Signed

Signed

Date of Birth

Date Signed

Address