



The Fund Manager  
 Pacific Equities & Investments Limited  
 P.O.Box 669  
 Port Moresby

Ph: 321 2855 Fax: 321 1240

Shareholder Number
Date

Pay Deduction Scheme Authority Form

**PACIFIC BALANCED FUND—Pay Deduction Scheme Authority**

**A** The PayMaster


You are hereby authorized to (Tick appropriate box);

- Deduct
- Stop Deducting
- Increase
- Decrease

<b>K</b>
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Amount to Increase/Decrease/Deduct

Forward payment to Pacific Equities Investments Limited for the purchase of Units in Pacific Balanced Fund.

Insert Company Information

**B** Fill in your Personal Details.

Applicants given names	Surname or family name	
Date of Birth	Marital Status	Sex
Home Village	Home District	Home Province
Next of Kin	Address	

**C** Employment Details;

Employers Name	Telephone	Facsimile
Employee's File No.	Current Postal Address	
Job Location		
Job Designation	Industry (Government, Private Sector, Rural Sector)	
Email Address		

Applicant		
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(Signature)

(Date)

Office Use Only

Employer's Account Number	
Employee's Account Number	

Send completed Form to:  
**THE FUND MANAGER**  
**PACIFIC EQUITIES & INVESTMENTS LTD**  
**P.O. BOX 669**  
**PORT MORESBY**