The Home of Retirement Funds

For Retirement and Living Annuity solutions

etfSA RETIREMENT ANNUITY FUND REGULAR ELECTRONIC FUNDS TRANSFER (EFT) CONTRIBUTION FORM

If you wish to make regular/irregular contributions by transferring by EFT to the Fund Bank account as listed below and do not wish to inform the Fund each time that you make a contribution, you should complete this form. Please read the terms and conditions below.
Please complete and return to etfSA.co.za at the following addresses: **Email: rafunds@etfsa.co.za or Fax: 086 692 4543** or post to**: P O Box 87008, Houghton, 2198.** If assistance is required in completing this form, please contact us on **010 446 0374.**

1. INVESTOR DETAILS

Policy Number:

Title: First Names:

Surname / Registered Name:

Identity / Passport No.: Date of birth:

E-mail Address: ______________________________

2. etfSA RETIREMENT ANNUITY FUND INVESTMENT OPTIONS

Please invest my funds in the following portfolio/s. You may elect one or more investment option.

			% into each Portfolio
1.	**Wealth Conservator**	**Fund (CPI + 3%)**	
2.	**Wealth Builder**	**Fund (CPI + 5%)**	
3.	**Wealth Enhancer**	**Fund (CPI + 7%)**	
4.	**Wealth Protector**	**Cash Fund**	
5.	**Wealth Default**	**Strategic Asset Allocation Benchmark Fund**	

3. EFT DETAILS

Note that the EFT reference number **must be your Account Number** (policy number). Do not add any other characters to the Account Number as that will result in the rejection of the EFT as the Administrators will not be able to allocate the EFT to your Account. If this occurs, you must provide proof of payment and a completed Additional Lump Sum Contribution form.

Source of Funds: Salary ☐ Policy ☐ Donation ☐ Gift ☐ Savings ☐ Investment ☐ Inheritance ☐

Other (Please specify): ______________________________

In the event that a specific EFT has a different source of fund from that indicated, you must inform the Fund of the source prior to the Fund being able to accept the investment.

Lump sum payments should be made to:
etfSA RA Fund Account
Bank: **First National Bank (Cheque Account)** Account No.: **62713815910**
Branch: **RMB Corporate Banking** Branch Code: **204109**
Reference: Your policy number

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4. INVESTOR DECLARATION

a) I confirm that all information provided in this form and all other documents signed by me in connection with this application, whether in my handwriting or not, is correct.

b) I am responsible for the accuracy and completeness of all answers, statements or other information provided by me or on my behalf.

c) I have not received advice from the Administrator in respect of this application.

d) I confirm that the Administrator may accept signed instructions by facsimile or via other electronic means.

e) I have read, understood and agree to the Terms and Conditions of Membership.

f) By his/her signature hereto the client warrants that he/she has legal capacity to enter into this agreement. If the client is a legal person other than a natural person, the client must furnish etfSA RA Fund with a copy of a resolution confirming that the person signing this agreement on behalf of the client is duly authorised to do so.

g) I agree to abide by any rules, procedures, standards, requirements or any other conditions that may be established by etfSA RA Fund in connection with the use of its electronic services or any other electronic communication services made available by etfSA RA Fund.

h) I acknowledge and accept that for an EFT to reflect in my etfSA account may take up to 4 business days.

i) The Administrator will allocate the EFT based on the reference number on your EFT. If the reference number is not your Account number, the amount will not be allocated to your account. If you do not see the amount allocation to your Account within 4 business days, please contact the Fund.

Signed at: ____________________ on this ______ day of ______________ year ________

Signature of investor: ______________________________________