

A Client identification

Last name of account/contract holder _____ First name _____ Initials _____
 Address _____
 City _____ Province _____ Postal Code _____
 Social Insurance No. _____ Telephone - home _____ Telephone - work _____

B Information on receiving institution

Corporate name of receiving institution _____ Name of contact person _____
 Address _____
 City _____ Province _____ Postal Code _____
 Telephone _____ Fax _____ Group contract No. (if applicable) _____
 Client's account/contract No. _____

Reserved for brokerage firms offering mutual funds

OR
 Corporate name of brokerage firm _____ Brokerage firm No. _____
 Name of representative _____ Representative No. _____
 Telephone _____ Fax _____ Brokerage firm account No. _____

Type of registered investment RRSP RRIF Spousal RRSP Spousal RRIF locked-in RRIF* TFSA Restricted LIF (federal)
 Restricted Locked-in RSP (federal) locked-in RRSP Federal LIF (federal) LIF (provincial)* LIRA (provincial)* _____
 British Columbia _____ Indicate province* _____
 Name of contact person _____ Telephone No. _____ Transit No. _____

C Instructions of client to transferring institution

Corporate name of transferring institution _____
 Address _____
 City _____ Province _____ Postal Code _____
 Group contract No. (if applicable) _____ Client's account/contract No. _____

Transfer
 In cash* In kind
 Total Partial* \$ _____ OR see list

* See declaration in bold in the "Client authorization" section below. RESERVED FOR TRANSFERRING INSTITUTION Do not deliver before
 Investment amount _____ Security symbol and/or No., contract No. or certificate No. _____

D Client authorization

I hereby request the transfer of my account and the investments in it, in the manner specified above.
*** IN THE EVENT OF A CASH TRANSFER, I AUTHORIZE THE LIQUIDATION OF ALL OR PART OF MY INVESTMENTS AND I AGREE TO PAY ALL APPLICABLE CHARGES OR ADJUSTMENTS.**
Designation of beneficiary for death or unseizability (complete F.12724 "Designation and change of beneficiary").

Signature of account holder _____ Date _____ Signature of irrevocable beneficiary (if applicable) _____ Date _____
 I consent to the transfer of the account.

E Reserved for transferring institution

Type of registered investment RRSP LIRA locked-in RRSP RRIF eligible ineligible locked-in RRIF LIF TFSA
 Restricted LIF Restricted locked-in RSP If locked-in, applicable law Federal Provincial _____
 Spousal plan No Yes _____ Indicate province _____
 First name _____ Last name _____ Initials _____ Social Insurance No. _____
 Funds transferred _____ \$ _____
 Contact person _____ Telephone _____ Fax _____
 Authorized signature _____ Date _____

F Receipt by receiving institution

(Do not give a tax receipt for the transferred amount to the holder.)
 We have received the amount of \$ _____ that we are to manage according to the instructions in part B and, if applicable, part E.

 Name of the receiving institution

 YY / MM / DD _____ Signature of authorized person _____