



Transfer authorization for registered investments

PART 1 – CLIENT IDENTIFICATION							
Account/policyholder last name		First name & initial(s)					
Address					Postal code		
Social Insurance Number H		lome telephone number		Alternat	Alternate telephone number		
) –		(_		
PART 2 – RECEIVING INSTITUTION INFORMATION							
Receiving institution Address: Canada Life, Group Retirement 255 Dufferin Avenue, T540, Lon					4K1		
CANADA LIFE							
Name of employer/plan sponsor ENGINEERS	Policy/plan number Pl 35408		Plan typ	Plan type RRSP or Locked-in RRSP (LIRA) Spousal RRSP			
PART 3 – CLIENT DIRECTION TO RELINQUISHING INSTITUTION							
Relinquishing institution name							
Address						Postal code	
Client account/policy number		sh value of (check on ount/policy ☐ Partia	check one box only) ☐ Partial account/policy as indicated below or on attached list				
* Please refer to bold statement in Cli	tion section below	For use	For use by relinquishing institution				
Investment amount (\$)		Symbol and/or certificate/policy number			Delay transfer until (mm dd yyyy)		
Investment description							
Investment amount (\$)		Symbol and/or certificate/policy number		Delay tr	Delay transfer until (mm dd yyyy)		
Investment description	L			L			
PART 4 – CLIENT AUTHORIZATION							
I hereby request the transfer of my accoul have requested a transfer in cash. I accharges or adjustments.	nt and its inve uthorize the li	stments as described quidation of all or p	d above. part of my investm	ents and I	agree to pa	ay any applicable fees,	
X Signature of account/policyholder					Date		
X							
Signature of preferred or irrevocable benefic	le)	Date					
PART 5 – ACCEPTANCE BY RECEIVING INSTITUTION							
The receiving institution named above acare received, will credit the annuitant or m				ds and an	application f	or membership in the plan	
	Sarah Hopkins, AVP, GRS Administration						
Date				Position or office			
PART 6 - FOR USE BY RELINQUISH							
Registered type RPP DPSP	RRSP (perso	nal) 🔲 Locked-in R	RSP (LIRA)				
RRSP (spousal) – Spouse's name Social Insurance Number							
Locked-in funds No Yes Original owner Yes No (no means funds originate from a former or deceased spouse/common-late						ouse/common-law partner)	
Locked-in amount Governing legislation		Sex-distinct amount			Unisex amo	ount	
\$		\$			\$		
Contact name				Telephone	()		
Authorized signature	Position			Date			

How to complete a transfer authorization form

If you have questions or need help to complete the form, call **1-800-724-3402** to speak with a representative Monday to Friday between 8 a.m. and 8 p.m. ET. Additional transfer forms are available at <u>grsaccess.com</u>. Sign in, then go to Change your portfolio> Printable forms.

Before you begin your transfer authorization form, you'll need:

- Your social insurance number (SIN)
- Your policy/plan number (Look online at <u>grsaccess.com</u>, or on your plan member statement for your client policy/plan number.)
- Your latest statement from the financial institution holding the savings you wish to transfer. Depending on the financial institution, you may also be able to find the information online.

NOTE: If you're transferring your savings from a registered account that has a preferred or irrevocable beneficiary, that beneficiary will need to sign the form as well. To determine whether or not you have an irrevocable or preferred beneficiary, please contact the financial institution that currently holds your savings.

Part 1 – Your personal information

Ensure the personal information you enter here exactly matches the personal information on your group plan statement. For example, if you have used a middle name or a middle initial on your statement, include it here. It helps us make sure your savings are transferred to the correct person.

Part 2 – Information about your group plan

Provide the name of your employer/plan sponsor and your group policy/plan number. Then select the type of plan you are moving your savings into. The options are shown on the form:

- Registered pension plan
- RRSP
- Locked-in RRSP (LIRA)

Part 3 – Information about the financial institution which currently holds your savings

Provide the name and mailing address of the financial institution which now holds the savings to be transferred. Include details on your account or policy. You will find all this information on your statement or, depending on your financial institution, you may be able to find it online.

We recommend you ask the financial institution currently holding your savings if you'll be charged any transfer fees or deferred sales charges to transfer out of your current plan.

Part 4 – Sign and date

Sign and date the transfer form in this section.

If you are transferring a registered account with a preferred or irrevocable beneficiary, that person will also need to sign the form.

Part 5 – Canada Life completes this section

Part 6 – The financial institution that currently holds your savings will complete this section

When you've completed the form, deliver it to the financial institution which holds the savings you want to transfer.