

# Transfer Authorization for Registered Investments (Retirement Savings Plan (RSP), Locked-In Retirement Account (LIRA), Locked-In Retirement Savings Plan (LRSP), Retirement Income Fund (RIF), Tax-Free Savings Account (TFSA))

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**Complete this form for:**

- RSP to RSP transfers (excluding transfers due to marriage breakdown)
- TFSA to TFSA transfers (excluding marriage breakdown)
- RIF/RSP to RIF/RSP transfers

**Note:**

- Complete Sections 1 through 4, forward the original to the relinquishing institution, send a copy to the receiving institution and keep a copy for your records.
- The completion of this transfer will NOT result in reporting of income or issuance of an official tax receipt.

## 1 Client identification

Owner's name (last, first, middle initial)		Date of birth (mmm/dd/yyyy)		SIN	
Address					
City	Province	Postal code	Home phone number	Mobile phone number	

## 2 Receiving institution information

Receiving institution name		Business phone number		Business fax number		Client account number			
Address				City		Province		Postal code	
<b>Investment type:</b>									
Registered type <input type="radio"/> RSP <input type="radio"/> Spousal RSP <input type="radio"/> LIRA <input type="radio"/> LRSP <input type="radio"/> RIF <input type="radio"/> Spousal RIF <input type="radio"/> TFSA									

## 3 Client direction to relinquishing institution

Relinquishing institution name					
Address		City		Province	Postal code
Client account/policy number	Group plan number (if applicable)	Member certificate number			<b>OR</b>
<b>Transfer (check one box only)</b>					
<input type="radio"/> All in cash* <input type="radio"/> Partial in cash* - as listed below or on attached list <i>* Please refer to statement in bold in Client authorization section below</i>					<b>For use by relinquishing institution</b>
Investment amount		Symbol and/or certificate number or policy number		Delay delivery until (mmm/dd/yyyy)	
Investment description					
Investment amount		Symbol and/or certificate number or policy number		Delay delivery until (mmm/dd/yyyy)	
Investment description					

## 4 Client authorization

I hereby request the transfer of my account and its investments as described above. <b>* Where I have requested a transfer in cash, I authorize the liquidation of all or part of my investments and agree to pay any applicable fees, charges or adjustments.</b>	
Signature of owner	Date (mmm/dd/yyyy)
Irrevocable beneficiary: I consent to the transfer of the account.	
Signature of irrevocable beneficiary (if applicable)	Date (mmm/dd/yyyy)

## 5 For use by relinquishing institution only

<b>Investment type</b> <input type="radio"/> RSP <input type="radio"/> LIRA <input type="radio"/> LRSP <input type="radio"/> RIF <input type="radio"/> TFSA				
<b>Spousal plan (N/A for TFSA)</b> <input type="radio"/> No <input type="radio"/> Yes		If yes, provide contributor's:		
Last name	First name		Initial	SIN
<b>Locked-In (for RSP's only)</b> <input type="radio"/> No <input type="radio"/> Yes				
Locked in funds		Governing legislation		
\$				
Contact name		Telephone number		Fax number
Authorized signature				Date (mmm/dd/yyyy)

COPY 1 – RELINQUISHING INSTITUTION    COPY 2 – RECEIVING INSTITUTION    COPY 3 – AGENT

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