

Manulife Bank of Canada
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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))

- 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	
Investment type:							
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	OR	Group plan number (if applicable)	Member certificate number	
Transfer (check one box only)				
<input type="radio"/> All in cash* <input type="radio"/> Partial in cash* - as listed below or on attached list				
* Please refer to statement in bold in Client authorization section below				
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. * 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.	
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

Investment type				<input type="radio"/> RSP	<input type="radio"/> LIRA	<input type="radio"/> LRSP	<input type="radio"/> RIF	<input type="radio"/> TFSA
Spousal plan (<i>N/A for TFSA</i>)		<input type="radio"/> No	<input type="radio"/> Yes	If yes, provide contributor's:		Initial	SIN	
Last name				First name				
Locked-In (<i>for RSP's only</i>)		<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)		