Manulife Bank

$US Funds Transfer Agreement

Use this form to connect your Manulife Bank account with your account at another financial institution. You can also use this form to set up a one-time or recurring transfer between your accounts. This funds transfer agreement is for $US accounts only.

Skip the form. Link your account online instead.

The easiest way to transfer money between your accounts is to link your external accounts through the Manulife Bank mobile app or online banking. Sign in and select:

- Transfers > Link external account (for mobile banking)
- Money transfers > Link external bank account (for online banking)

If you're unable to link your accounts online, follow these instructions:

1. Complete and sign this form.
2. Return this completed form AND a personalized cheque marked "VOID" using ONE of the following methods:

Online Banking:

1. Sign into your account at manulifebank.ca
2. Select **Products & Services** and then **Upload Documents** from the left side menu

Fax:

1-866-840-6425

Mail:

Manulife Bank of Canada
500 King Street North
Waterloo, ON N2J 4C6

1 Information about your Manulife Bank account

Primary account holder name (Last, first, middle initial)

Secondary account holder name (Last, first, middle initial), if applicable

Your Manulife Bank account number(s)

2 I want to: (check one)

◯ **Link Accounts Only**

- Attach a personalized cheque* from your account** at a Canadian financial institution made payable to yourself or marked VOID. Manulife Bank will link that account so you have the option to transfer funds to and from your new Manulife Bank account.
- **Complete section 4 below.**

◯ **Link Accounts AND Setup one-time transfer or recurring transfer**

- Attach a personalized cheque* from your account** at a Canadian financial institution made payable to yourself or marked VOID. Manulife Bank will link that account so you have the option to transfer funds to and from your new Manulife Bank account.
- **Complete sections 3 and 4 below**.

*If you can't get a personalized cheque, a Pre-Authorized Debit form or Bank Account Confirmation form completed by your current financial institution is required to verify the account information.
**Your linked account must be in the same name and currency as your Manulife Bank account.

3 Transfer Instructions (Optional)

Complete this section if you wish to authorize Manulife Bank to arrange a one-time or regular recurring funds transfer(s). Leave blank if you do not wish to arrange a transfer.

- Fund transfers can only be set up with a bank account at another Canadian financial institution that offers this service.
- The funds can take up to 5 business days to be available in the receiving account.

Direction of Funds

From which account?		**To** which account?	
Amount $	Start date (mmm/dd/yyyy)	End date (mmm/dd/yyyy) (optional)	◯ One-time transfer ◯ Monthly ◯ Semi-monthly* ◯ Weekly ◯ Bi-weekly

*For semi-monthly transfer frequency, the funds will be transferred on the 1st or 15th of the month, whichever is closest to the date you submit this agreement.

Direction of Funds (continued)

Set up an additional one-time or recurring funds transfer (optional)

Complete the following only if you wish to authorize Manulife Bank to arrange an additional one-time or regular recurring funds transfer.

From which account?	**To** which account?

Amount	Start date (mmm/dd/yyyy)	End date (mmm/dd/yyyy) (optional)		
$			◯ One-time transfer	◯ Monthly
			◯ Semi-monthly*	◯ Weekly
			◯ Bi-weekly	

*For semi-monthly transfer frequency, the funds will be transferred on the 1st or 15th of the month, whichever is closest to the date you submit this agreement.

4 Authorization

Manulife Bank of Canada, (the "Bank"), may debit or credit the Account(s) named in section 1 held by me/us with the Bank and the linked accounts (the "Other Account(s)") held by me/us with the other Canadian financial institutions (the "Other Financial Institution(s)") when transferring funds between them, subject to such limits and conditions as is required by the Bank and by the Other Financial Institution(s).

I/We acknowledge that this authorization is provided for the benefit of the Bank and the Other Financial Institution(s) identified on the attached VOID cheque(s), Pre-Authorized Debit form(s), or Bank Account Confirmation form(s) and is provided in consideration of the Bank and the Other Financial Institution(s) agreeing to process funds transfers against my bank accounts, in accordance with the Rules of Payments Canada.

Delivery and verification

I/We acknowledge that provision and delivery of this Agreement to the Bank constitutes delivery by me/us to the Other Financial Institution(s). Any delivery of this Agreement to the Bank constitutes delivery by me/us.

I/We acknowledge that the Other Financial Institution(s) are not required to verify that a funds transfer has been issued in accordance with the particulars of this Agreement including, but not limited to, the amount.

I/We acknowledge that the Other Financial Institution(s) is not required to verify that any purpose of payment for which a funds transfer was issued, which is a debit on the Other Account(s), has been fulfilled by the Bank as a condition to honoring a funds transfer debit issued or caused to be issued by the Bank on the Other Account(s).

I/We undertake to inform the Bank in writing, of any change to the Other Account(s) information provided in this Agreement at least five (5) business days prior to the next due date of a funds transfer (if applicable).

Electronic transfers

In order to authorize the Bank to arrange electronic funds transfers or to vary or cancel an existing authorization, I/we will contact the Bank by telephone (1-877-765-2265), personal computer or other electronic device as permitted by the Bank.

I/We need a password or code to initiate and authorize such transfers or changes, which I/we shall provide to the Bank. By using this password or code, and initiating a funds transfer or change, I/we acknowledge that, I am/we are authorizing the Bank to either transfer funds from the Account(s) to the Other Account(s) or from the Other Account(s) to the Account(s), as the case may be and as specified by me/us or to cancel or vary an authorization as may be applicable.

Cancellation

This funds transfer may be cancelled provided notice is received five (5) business days before the next due date of the funds transfer. A sample cancellation form, or further information on my/our right to cancel this funds transfer is available from the Bank or by visiting www.payments.ca. The Bank may also cancel this funds transfer agreement on no less than ten (10) business days notice.

I/We acknowledge that for a one-time funds transfer, this agreement will no longer be valid once the request has been fulfilled. Any subsequent one time funds transfer request(s) requires a new funds transfer agreement.

Revocation of this authorization does not terminate any contract for goods or services exchanged.

Privacy

I/We agree that my/our personal information with respect to the Account(s), the Other Account(s) and the Agreement may be disclosed to financial clearing institutions, in order to give effect to this Agreement. Any disclosure will follow the rules of Payments Canada. I/We acknowledge the collection, use and disclose of my/our personal information is for the purpose identified in this form. My/Our personal information may be accessed or transferred within or outside Canada and may be subject to the laws of those jurisdictions. I/We may withdraw my/our consent, subject to legal and contractual restrictions. I/We also have the right to access and correct my/our personal information maintained in the Bank files. For more information, I/we can review the Manulife Bank Privacy Policy.

Signatures

I/We warrant and guarantee that all persons whose signatures are required to sign on the Account(s) or the Other Account(s) have signed this Agreement below.

If the Account(s) or the Other Account(s) are held in joint names, we hereby jointly authorize the Bank to accept instructions from any one of us in accordance with this Agreement and agree that we each are responsible for transactions authorized by the other person.

I/We acknowledge and agree that I/we are fully liable for any charges incurred if the debits cannot be made due to insufficient funds or any other reason for which I/we may be held accountable.

Signature of primary account holder	Date (mmm/dd/yyyy)
Signature of secondary account holder	Date (mmm/dd/yyyy)

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