



ACCOUNT NUMBER

Annuitant Information			
SURNAME		GIVEN NAME(S)	
Have you had a change of address or phone number?		<input type="checkbox"/> Yes (Please complete)	<input type="checkbox"/> No
NEW STREET ADDRESS		CITY	PHONE NUMBER
		PROVINCE	POSTAL CODE
Has your beneficiary changed?		<input type="checkbox"/> Yes (Please attach a Designation of Beneficiary form)	<input type="checkbox"/> No
If you wish to access statements online, we will contact you with login information by:		EMAIL ADDRESS	
<input type="checkbox"/> Secure email	<input type="checkbox"/> Phone	<input type="checkbox"/> I/We decline online statements	

Deposit Details			
TRANSACTION CODE	240 Annuitant Deposit • 210 RRSP Transfer • 211 Spousal RRSP Transfer		
PRINCIPAL AMOUNT (\$)	<input type="checkbox"/> Variable	RATE (%)	DEPOSIT DATE (MM/DD/YY)

Signatures		
SIGNATURE OF ANNUITANT	DATE (MM/DD/YY)	ACCEPTED BY AUTHORIZED OFFICER

Additional Notes

LSM - Internal Use Only	SOURCE	CLASSIFICATION	SERVICE NO.	POTENTIAL INTEREST	CLASS
<input type="checkbox"/> Cheque Deposit	<input type="checkbox"/> ICU Deposit	<input type="checkbox"/> Internal Transfer			
NAME OF FINANCIAL INSTITUTION	TRANSIT NO.	INST. NO.	ACCOUNT NO.	CHECKED BY	