



ACCOUNT NUMBER	MASTER NO.
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Annuitant Information

SURNAME		GIVEN NAME(S)	
CONTRIBUTOR'S SURNAME (if other than annuitant)		GIVEN NAME(S)	
Pension Lock-In ☐ Yes ☐ No		If YES, a copy of the agreement must be attached.	
Have you had a change of address or phone number? ☐ Yes (Please complete) ☐ No		PHONE NUMBER	
NEW STREET ADDRESS		CITY	PROVINCE POSTAL CODE
Has your beneficiary changed? ☐ Yes (Please attach a Designation of Beneficiary form) ☐ No			
If you wish to access statements online, we will contact you with login information by:		EMAIL ADDRESS	
☐ Secure email ☐ Phone ☐ I/We decline online statements			

Deposit Details

TRANSACTION CODE	282 Internal Transfer / Renewal • 283 External Transfer				
PRINCIPAL AMOUNT (\$)	☐ Term ☐ Variable	YRS / MTHS	RATE (%)	DEPOSIT DATE (MM/DD/YY)	MATURITY DATE (MM/DD/YY)
PRINCIPAL AMOUNT (\$)	☐ Term ☐ Variable	YRS / MTHS	RATE (%)	DEPOSIT DATE (MM/DD/YY)	MATURITY DATE (MM/DD/YY)
PRINCIPAL AMOUNT (\$)	☐ Term ☐ Variable	YRS / MTHS	RATE (%)	DEPOSIT DATE (MM/DD/YY)	MATURITY DATE (MM/DD/YY)

Signatures

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

LSM - Internal Use Only	SOURCE	BONUS LEVEL	CLASSIFICATION	SERVICE NO.	POTENTIAL INTEREST	CLASS
☐ Cheque Deposit ☐ ICU Deposit ☐ Internal Transfer						
NAME OF FINANCIAL INSTITUTION		TRANSIT NO.	INST. NO.	ACCOUNT NO.	CHECKED BY	