

Do not use this form for transfers due to death or marriage breakdown.

- Complete all sections below and forward to the institution that will transfer your funds to Manulife.
- Completing this transfer will NOT result in the reporting of income or issue of a tax receipt as your savings remain in registered funds. Tax will only be withheld on transfers from an RRSP to a TFSA.

You can find this form online by signing in to your account with your Manulife ID at \_manulifeim.ca/retirement. Look for Forms under 'Quick links' or 'Helpful information' on your homepage.



#### Don't have a Manulife ID yet?

Sign up now to access your account anytime on our secure website. Go to \_manulifeim.ca/retirement\_, click `Sign in' and follow the instructions to set up your Manulife ID.

#### Print clearly in the blank boxes. Remember to sign and date the form.

Need help? Contact Customer Service at 1-888-727-7766.

### 1. Your personal information

Last name		First name			Middle initial
Mailing address (number, street & apartment number)		City		Province	Postal code
SIN Telephone number		Ext	Email address	(if applicable)	

## 2. Your direction to the Institution transferring your savings

Relinquishing	g institution name					
FROM:						
Address			City	Provinc	e Postal Code	
Account/policy number OR G			Group plan number	Group plan number		
Transfer casl	h value of (check one bo	x only)				
Full cash	amount					
OR						
Partial ca	sh amount (specify accou	nts and amounts b	elow).			
	Investment amount	Symbol and/or	certificate number or policy nu	elay delivery until (dd/mmm/yyyy)		
Amount	Investment description			I		
All	Investment amount	Symbol and/or certificate number or policy number Delay delivery until (dd/mmm/y				
Amount	Investment description					
All	Investment amount	Symbol and/or certificate number or policy number Delay delivery until (dd/mmm/y			elay delivery until (dd/mmm/yyy	
Amount	Investment description					

All	Investment amount	Symbol and/or certificate number or policy number	Delay delivery until (dd/mmm/yyyy)
Amount	Investment description	·	
All	Investment amount	Symbol and/or certificate number or policy number	Delay delivery until (dd/mmm/yyyy)
Amount	Investment description	1	1

# 3. Your direction to Manulife (the receiving institution)

If your plan offers Group IncomePlus, note this option is intended to provide you with guaranteed retirement income. Before you select Group IncomePlus, review *The Bold Print*—a separate document that you'll find on the secure site under the 'Plan for Retirement' section **or** at manulife.ca/groupincomeplus.

If you transfer funds to your existing Group IncomePlus, please remember that a contribution exceeding 20% of your Guaranteed Benefit Base will reset your Minimum Five (5) Year Holding Period whether you make one large contribution or a series of smaller transfers and contributions over a 365-day period.

Receiving institution Manulife, Group Retirement, P.O. Box 396 Waterloo, ON N2J 4A9				
Group policy number	Member number	Customer number 10		
Account type: RSP LRSP	LIRA TFSA RPP			

### Investment instruction for this transfer.

Check here if you want your transfer to be deposited as per your current investment instruction with Manulife.

### OR

Provide investment instruction below (fund codes, names, and details appear online at manulifeim.ca/retirement).

Fund code	Fund name	Dollar amount		Percentage
		\$	OR	%
		\$	OR	%
		\$	OR	%
		\$	OR	%
		\$	OR	%
		\$	OR	%
	1	Must equal	100%	

### 4. Please read and sign here



I hereby request the transfer of my account and its investments as described above.

I have requested a transfer of the cash value of my investments. I authorize the liquidation of all or part of my investments and agree to pay any applicable fees, charges, or adjustments.

I have selected Group IncomePlus, I acknowledge that I have read and understood *The Bold Print* (a separate document that you'll find on the secure site under the 'Plan for Retirement' section **or** at \_manulife.ca/groupincomeplus) and by signing below, I agree to the terms, conditions, and fees applicable to that option.

Signature of Account Holder	Date (dd/mmm/yyyy)
Irrevocable Beneficiary: I consent to the transfer of the account.	
Signature of Irrevocable Beneficiary (if applicable)	Date (dd/mmm/yyyy)

5. For use by transferring institution only									
Account type:	C RSP	LRSP	LIRA	🗖 TF	sa 🕻	RPP		DPSF	5
Spousal Plan? D No Ves – if "Yes", Contributor's information:									
Last name			First	name			Initial		SIN
Locked-In funds No Yes, confirmation attached Governing legislation									
Contact name			Title		Teleph	one number		Fax	x number
Authorized signature						Date (c	ld/mmi	m/yyyy)	

## **Personal information**

We collect, use, and disclose your personal information for the purpose of processing your request. We disclose your personal information to authorized employees, agents, representatives, financial institutions and other parties with whom we deal with in issuing and administering your product(s) and services, now and in the future. Also, we disclose your personal information to service providers who require this information to perform their services for us (for example data processing, programming, data storage, and printing). Unless there are contractual limitations, your personal information may be accessed or transferred within or outside Canada and may be subject to the laws of those jurisdictions. You may withdraw your consent subject to legal and contractual restrictions. You also have the right to access and correct your personal information maintained in our files. For further information you can review our Privacy Policy or email us at Canada\_Privacy@manulife.ca

### Send us your documents online

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It's faster and safer than email or regular mail.

From your Manulife Mobile app, sign in with your Manulife ID (choose Group Retirement). From the top left menu, select your name to get to your profile, then select **Send documents.** or

From your desktop or tablet, sign into your account at manulifeim.ca/retirement using your Manulife ID. Look for **Send documents** on your homepage under 'Quick links' **or** 'Helpful information'.

If you need to mail the form, send it to one of the addresses below.

Outside of Quebec:	Quebec:
Manulife	Manulife
Group Retirement	Group Retirement
P.O. Box 396	2000 Mansfield, Suite 1410
Waterloo, ON N2J 4A9	Montréal, QC H3A 3A2
Fax: 1-866-945-5110	Fax: 1-866-945-5109