

Withdrawal form

Please print clearly in the blank boxes.

Use this form for cash withdrawals, transfer of funds to an individual or group plan with Manulife or transfer of funds to another financial institution. To terminate membership in the plan, use form GP0765. If you belong to more than one plan, complete a separate form for each plan.



This form is also available at www.manulife.ca/GRO in the 'Manage your plan' section. Send us stuff online

Send us your completed form by signing in to your online account at Manulife.ca/GRO. Look for Send documents in your homepage under the 'My Account' tab.

Not signed up yet?

Access your savings anytime, using our secure website. Go to Manulife.ca/GRO and click 'Sign in' to get started.

Your personal information

Plan Sponsor/Employer					Group	Policy number		
Member number			Customer number					
Last name			First name			Middle initial		
Mailing address (number, street and apartment number)				Telephone number*				Ext.*
City	Province	Country		Postal Co	ode	Email address*		
*These fields are optional.			I					

Your withdrawal type

□ Transfer to an individual or group plan with Manulife

□ Transfer to another financial institution

Cash withdrawal

Your withdrawal amount

□ Full withdrawal of all funds

Are future contributions going to continue? □ Yes □ No

(If No, member status will be changed to inactive)

Partial withdrawal amount Must equal total amount shown in fields below.

Gross dollar amount \$	

Include Group IncomePlus investments in the withdrawal request: Yes No

If you do not make a selection, no money will be withdrawn from Group IncomePlus.

If you selected 'Yes' and withdraw funds from Group IncomePlus, your withdrawal will reduce your Guaranteed Benefit Base and the Guaranteed Annual Income Amount it will provide. If the amount of the withdrawal is more than your Guaranteed Benefit Base, a Freeze Period will begin. You will not be able to make any Occasional Contributions to Group IncomePlus until this period concludes. Before you withdraw from Group IncomePlus, learn more by logging into your account at www.manulife.ca/GRO.

\$

Optional: You can choose which investments you want to withdraw from.

Investment code	Amount to be withdrawn \$	Investment code	Amount to be withdrawn \$
Investment code	Amount to be withdrawn \$	Investment code	Amount to be withdrawn \$

Your transfer information

Please ensure any appropriate	What type of plan	What type of plan are the funds being transferred to?					
transfer forms are attached.	Policy Number			Pension Plan	Policy Number		
	Annuity	Policy Number		RRIF/LIF/LRIF	Policy Number		
	□ TFSA	Policy Number		□ Non-Registered	Policy Number		
	Name of new financial institution						
	Mailing address (number, street and suite number)						
	City		Province	Postal Code			

a market value adjustment, and/or a service charge applied if applicable. Not all withdrawal types may be available under your plan. See your Plan Administrator for details.

Note: Tax may be deducted and/or

Please be aware: Due to market fluctuations a partial dollar value requested for withdrawal may not be available at the time the transaction is being completed. If the partial dollar value requested for withdrawal is equal to 96% to 99% of the Member account value, the entire Member account value will be withdrawn.

Your payment method

FOR CASH WITHDRAWALS ONLY

Direct deposit is available only to Canadian currency bank accounts.

1 🕨 🗆 Direct Deposit	2 🕨 🗆 Cheque			
Bank Name	Specify where cheque should be mailed:			
** 108** * <u>*01122</u> *** <u>540</u> ** <u>00011***001111</u> **	 Plan Administrator Member's address (shown above) Other (specify) 			
Transit Number Institution Number Account Number				

Please sign here

I understand that I have made a selection from the withdrawal options listed and I require no further information on these options. Where locked-in funds are being transferred, I agree that they will be administered in accordance with applicable legislation. By withdrawing my funds in cash (where available), I acknowledge that these funds may be subject to income tax withholding, fees or market value adjustment. I hereby certify that the information on this form is correct to the best of my knowledge.

If I am withdrawing Group IncomePlus investments, I understand that this transaction will affect my Group IncomePlus benefits.

Your signature	Date signed (dd/mmm/yyyy)
Irrevocable beneficiary's signature (if required)	Date signed (dd/mmm/yyyy)
Plan Administrator's signature (if required)	Date signed (dd/mmm/yyyy)



Got something to send us?

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Not signed up yet?

Access your savings anytime, using our secure website. Go to Manulife.ca/GRO and click 'Sign in' to get started. You'll need your unique customer number and social insurance number to join. You can find your unique customer number on your welcome letter or a recent statement.

Mailing instructions

Send your completed forms to the address below.

If you live outside of Quebec: Manulife

Attn: GRS Client Services P.O. Box 396 Waterloo, ON N2J 4A9

Fax: 1-866-945-5110

If you live in Quebec:

Manulife Group Retirement Solutions 2000 Mansfield, Suite 1410 Montréal, QC H3A 3A2

Fax: 1-866-945-5109