

1. ACCOUNT DETAILS

Account Holder Name (First, Initial, Last)	Social Insurance Number
Account #1 Account Number	Account Type
Account #2 Account Number	Account Type
Account #3 Account Number	Account Type
Account #4 Account Number	Account Type

2. CHANGE OF BENEFICIARY INFORMATION

I hereby revoke any designation of beneficiary made by me for this/these account(s) and I hereby designate the person(s) named below, if then living, as beneficiary(ies) of the proceeds payable under the account(s) in the event of my death. In the event a designated beneficiary is not living at my death, any amount that would have otherwise been payable from my account(s) to the deceased beneficiary shall be paid to my estate. I am solely responsible for ensuring that this designation of beneficiary is legally valid.

CAUTION: In some provinces, your designation of beneficiary by means of this form will not be revoked or changed automatically by any future marriage or divorce. If you wish to change your beneficiary(ies) again in the future, you should do so by completing a new *Change of Beneficiary Form*. This form **must be signed by the account owner**. A beneficiary designation purported to be made pursuant to a Power of Attorney may be invalid. Accordingly, this form **cannot be signed by a person acting as an attorney pursuant to a Power of Attorney instrument** except in very limited circumstances. If you are seeking to designate a beneficiary on behalf of an adult, contact your lawyer for advice. If you are designating the beneficiary(ies) of a locked-in account, see the applicable addendum for important terms and conditions.

Account #1: <input type="radio"/> My Estate <input type="radio"/> My Spouse/Partner as Successor Annuitant / Holder (RIF or TFSA accounts only; not available for locked-in accounts) <input type="radio"/> My Spouse/Partner <input type="radio"/> Other					
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Account #2: <input type="radio"/> My Estate <input type="radio"/> My Spouse/Partner as Successor Annuitant / Holder (RIF or TFSA accounts only; not available for locked-in accounts) <input type="radio"/> My Spouse/Partner <input type="radio"/> Other					
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Account #3: <input type="radio"/> My Estate <input type="radio"/> My Spouse/Partner as Successor Annuitant / Holder (RIF or TFSA accounts only; not available for locked-in accounts) <input type="radio"/> My Spouse/Partner <input type="radio"/> Other					
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Account #4: <input type="radio"/> My Estate <input type="radio"/> My Spouse/Partner as Successor Annuitant / Holder (RIF or TFSA accounts only; not available for locked-in accounts) <input type="radio"/> My Spouse/Partner <input type="radio"/> Other					
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage
Name of Beneficiary (First, Initial, Last)	Relationship	Percentage	Name of Beneficiary (First, Initial, Last)	Relationship	Percentage

3. ACCOUNT HOLDER AUTHORIZATION (READ CAREFULLY BEFORE SIGNING)

By signing and dating below, I acknowledge, agree and consent to all of the foregoing and confirm that the information I have provided is correct.

x Account Holder Signature	Date (dd/mm/yyyy)
-------------------------------	-------------------