

Trade made via FundSERV network:

 Check here ☐

Agency code	Advisor code	S.U.	Advisor	Advisor's telephone number	Extension
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contract no.	Annuitant's first and last name (in block letters)			FundSERV contract	
<input type="text"/>	<input type="text"/>			Dealer code	Intermediary code
<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>

**1. ☐ TOTAL SURRENDER**
☐ **TOTAL** – If the contract contains a loan, it will be reimbursed from investments in the contract.

☐ **MAINTAIN PAC**
**2. ☐ PARTIAL SURRENDER**
☐ **10% free amount only**  
 (Surrender instructions mandatory)

☐ **All matured units in the contract**
**AMOUNT (Min. \$100):** \$  or ☐ **GROSS (Default)** (GROSS = before fees and taxes)  
 or ☐ **NET** (NET = after fees and taxes)

If both boxes are checked, the full no-fee amount will be withdrawn. Surrender instructions are mandatory for the 10% free amount.

Where applicable, the surrender amount must cover the loan balance. Please specify whether the amount requested is:

☐ **Before loan reimbursement**
☐ **After loan reimbursement (Surrender instructions in % only)**
☐ **For loan reimbursement only**
**SURRENDER INSTRUCTIONS**
☐ **Daily interest fund+ (DIF+):** \$  or  % ☐ **High interest savings account:** \$  or  %

☐ **Investment funds (Complete the table below)**

<b>NOTES:</b> • Use the surrender calculator on the Extranet to complete this section. • The total cash amount or percentage must equal 100% of the requested amount. • In the absence of surrender instructions, the requested amount will be withdrawn from each investment fund in proportion to its market value.	<b>Fund no.</b>	<input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Units	<b>Order no. (FundSERV)</b>	<b>Indicate a fund number for the balance, should it be necessary:</b>  <b>Fund no.:</b> <input type="text"/>
	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>			

☐ **Guaranteed interest fund (GIF)** (For GIF: Gross = requested amount including interest before fees and taxes, NET = after fees and taxes)

Deposit date	Amount of deposit	Amount to be surrendered	Time of surrender
Y Y Y Y M M D D			
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/> Total <input type="checkbox"/> Interest <input type="checkbox"/> \$ <input type="text"/>	<input type="checkbox"/> Before maturity <input type="checkbox"/> At maturity
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/> Total <input type="checkbox"/> Interest <input type="checkbox"/> \$ <input type="text"/>	<input type="checkbox"/> Before maturity <input type="checkbox"/> At maturity

**3. ☐ PAYMENT METHOD**
**Direct deposit** – Void personal cheque:

☐ **ATTACHED** to this request. (Attach personalized void cheque in the contract owner's name.)

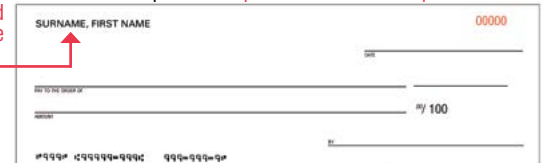
☐ **ON FILE** to contract number: 

**MANDATORY** (Individual Savings Contract) You must indicate the contract for which you have previously provided a personalized void cheque. (If the reference number is incorrect, if the cheque is not a personalized cheque or not on file, payment will be made by cheque.)

☐ **Cheque (default)**

Client name must be pre-printed on the cheque

Example of valid personalized void cheque


**4. ☐ SPECIAL INSTRUCTIONS**
**5. ☐ SIGNATURES**

I request that the transaction indicated above be carried out in accordance with the rights, conditions and stipulations of the contract.

**!** I confirm that if the withdrawal is made from the Guaranteed Surrender Series, Ecoflextra Series or the Income Stage of the FORLIFE Series funds, and the total of annual withdrawals in these series is greater than the GSA, LSA or FORLIFE Income, a downward adjustment will be made.

**X**    
 Applicant or assignee

**X**    
 Advisor

**X**    
 Irrevocable beneficiary

**X**    
 Co-applicant

Y	Y	Y	Y	M	M	D	D
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Date

 It is required under certain legislation that we advise you that your claim is governed by a limitation period that is set out in the *Insurance Act* or other applicable provincial legislation.
