

FOR FUNDSERV TRANSACTIONS ONLY

DEALER CODE: _____ REP CODE: _____

Client Services **Dealer Support (FUNDSERV)**

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Email: investments.retirement@assumption.ca Email: fundserv.support@assumption.ca

Financial Transaction Request

Policy Number: _____ **Client Number:** _____

Type of contract: Individual Group

Non-registered RSP Spousal RSP Fed. locked-in RSP Locked-in RSP (prov.) _____

TFSA LIRA (prov.) _____ RIF Spousal RIF LIF (prov.) _____

Annuitant

Name	Last Name	Date of Birth (Day/Month/Year)
Address		
Telephone No.	E-mail	

Owner and/or Contributor

Name	Last Name	Date of Birth (Day/Month/Year)
Address		
Telephone No.	E-mail	

NOTE FOR NON REGISTERED ACCOUNTS ONLY :
 If your residence for tax purposes has changed, please complete the Canada Revenue Agency form RC518-Declaration of Tax Residence for Individuals, or form RC519-Declaration of Tax Residence for Entities, available on our website at www.producerscorner.ca. Each account holder of a joint account has to fill out a Declaration of Tax Residence form.

INVESTMENT FUNDS

Segregated Fund	Fund Code		Segregated Fund	Fund Code	
	Series B	Series C		Series B	Series C
Assumption Life Funds			Europe Fund	185	283
Growth Portfolio	414	514	American Disciplined Equity [®] Fund	404	504
Balanced Growth Portfolio	415	515	North Star [®] Fund	409	509
Balanced Portfolio	420	520	Monthly Income Fund	408	508
Conservative Portfolio	421	521	Canadian Asset Allocation Fund	413	513
SmartSeries Income Fund	441	541	Far East Fund	419	519
SmartSeries 2020 Fund	433	533	Emerging Markets Funds	429	529
SmartSeries 2025 Fund	434	534	NorthStar [®] Balanced Fund	430	530
SmartSeries 2030 Fund	435	535	CI Funds		
SmartSeries 2035 Fund	436	536	Signature Corporate Bond Fund	426	526
SmartSeries 2040 Fund	437	537	Signature Canadian Bond Fund	179	277
SmartSeries 2045 Fund	438	538	Signature High Income Fund	412	512
SmartSeries 2050 Fund	439	539	American Value Fund	403	503
SmartSeries 2055 Fund	440	540	Cambridge Canadian Dividend Fund	425	525
Louisbourg Funds			Cambridge Canadian Asset Allocation Corporate Fund	422	522
Balanced Fund	140	202	Signature Global Resource Corporate Class Fund	427	527
Canadian Dividend Fund	107	207	Signature Global Dividend Fund	428	528
Money Market Fund	109	209	Interest Accounts	GIC Code	
U.S. Equity Fund	166	205	Guaranteed Interest Account, 1-year non-redeemable	GICN1	
Preferred Share Fund	431	531	Guaranteed Interest Account, 2-year non-redeemable	GICN2	
Fixed Income Fund	152	204	Guaranteed Interest Account, 3 year non-redeemable	GICN3	
Canadian Small Capitalization Equity Fund	144	206	Guaranteed Interest Account, 4-year non-redeemable	GICN4	
Momentum Fund	129	229	Guaranteed Interest Account, 5-year non-redeemable	GICN5	
Fidelity Funds			Guaranteed Interest Account, 1-year redeemable	GICR1	
Canadian Opportunities Fund	146	230	Daily Interest Account	DIA	
True North [®] Fund	174	231			
International Growth Fund	194	292			

3. Account withdrawal(s) This section applies for withdrawals from your investment accounts with Assumption Life only. Please see section 5 if your request is for a single preauthorized debit deposit from your bank account.

Cheque Direct Deposit (include void cheque)

a) Partial withdrawal Amount \$ _____
 Gross (Before tax) or Net (After tax)

b) Full withdrawal PAD deposits to continue, if applicable
 PAD deposits to stop immediately

c) Automatic partial withdrawal for non-registered and TFSA accounts
 Monthly Quarterly Semi-annually Annually
 Montant \$ _____
 Gross (Before tax) or Net (After tax)
 Start date _____ (between the 1st and the 28th of the month)
 (Day/Month/Year)

Direct deposit only
 (Attach VOID cheque)

d) Specific withdrawal Prorated withdrawal
 Withdrawal per instructions below

Withdrawal from Fund (Name)	Fund Code	FundSERV Order ID	Amount : % or \$

4. Request to change guaranteed interest account term upon reinvestment

GIA number _____. Upon maturity of the GIA on ____/____/____, change investment term according to the following instructions and guarantee today's interest rate: Day Month Year

Daily interest account 1-yr redeemable 1-yr non-redeemable 2-yr non-redeemable 3-yr non-redeemable 4-yr non-redeemable
 5-yr non-redeemable

The interest rate to be applied will be the greater of the interest rate in effect on the date this form is signed or the interest rate in effect on the reinvestment date for the term specified above. If this form is signed more than forty-five (45) days prior to the reinvestment date, the interest rate to be guaranteed will be the rate in effect on the forty-fifth day prior to reinvestment for the term specified above. This form must be received at Assumption Life's head office within two (2) working days of the date it is signed.

Interest income option is requested (Attach void cheque) Monthly Annually

5. Start, change or stop preauthorized debit (PAD) deposits

Begin PAD deposits (attach void cheque) Amount \$ _____
 Frequency of withdrawals: monthly weekly every two weeks quarterly
 semi-annually annually twice monthly ___ and ___
 PAD start date ____/____/____ (between 1st and 28th)
 Day Month Year

Single deposit (attach void cheque) Amount \$ _____
 Date of single Deposit ____/____/____ (between 1st and 28th)
 Day Month Year

Increase current PAD deposits Increase amount to \$ _____ PAD to increase on ____/____/____
 Day Month Year

7. Special instructions:

I, the undersigned, hereby declare that all the information provided herein is truthfully given to the best of my knowledge and request that Assumption Life make the changes requested.

Signature of contributor (for spousal RRSP)

x _____

Signature of Annuitant

x _____

Signature of Irrevocable Beneficiary (Required for withdrawals and external transfers)

x _____

If the owner is a Body Corporate, the authorized persons' signature as well as their title and the company name (or seal) is required.

Signature of Owner(s)

x _____ x _____

Signature of Witness or Agent

x _____

Signed at _____ this _____ day of _____ 20 _____