

Part I - Annuitant/Holder Request

(Name) _____ (Social Insurance Number) _____ (Telephone) _____

(Address) _____

PLEASE TRANSFER: all the property, OR, lump sum of \$ _____ in cash, or in kind
FROM: RRSP Spousal RRSP LIRA/LIRSP RLSP RPP DPSP Retiring Allowance
 RRIF Spousal RRIF LIF LRIF MB RRIF RLIF SK RRIF TFSA

(Transferor Institution Name, Address and Phone Number) _____

(Contract or Plan #) _____ (Deposit #) _____ (Maturity Date, if applicable) (DD/MMM/YYYY) _____

TO: For RRSP/RRIF indicate: Spousal Non-Spousal
Contract # _____ at _____
(credit union/caisse populaire)
(address)

Check applicable specimen plan (Trustee: Concentra Trust) Credit Union Deposit Program RSP145-001
 Credit Union Deposit Program RIF-009
 Credit Union Retirement Savings Plan RSP145-658
 Credit Union Retirement Income Fund RIF-988
 Credit Union Tax Free Savings Account TFSA01450014

If from RPP/DPSP: I am the member, OR, the beneficiary spouse*, OR former spouse* due to breakdown of marriage or common-law partnership
* or other individual who has been given similar rights under applicable legislation

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

Date: _____ **Annuitant/Holder Signature** _____ OR, see attached letter
(DD/MMM/YYYY)

Certified By: _____
(Authorized Signature of Transferee) (Credit Union/Caisse Populaire name and phone number)

Part II - Transferor Institution

Amount transferred: \$ _____ (Transferor to issue T4RIF for transfers from RRIF to RRSP, or T4A for Retiring Allowance transfer.)

Spousal contributions: No Yes Contributor Name: _____ SIN: _____

Locked-in Funds: No Yes (if yes, complete pension information below)

Retiring Allowance: Amount to be reported in Box 26 (Eligible Retiring Allowances) of the employee's T4A slip. \$ _____

From RRIF: The transfer is from a Qualifying Pre-1993 RRIF. No Yes

From RPP: We did not transfer \$ _____ of the amount in accordance with subsections 147.3(1) to (7), and, we will report this amount as income of the applicant on a T4A slip.

Complete if amounts are Locked-In under Pension Legislation:

Locked-in Pension Amount \$ _____ Have funds been held in a LIF/LRIF/RLIF at any time during year of transfer? No Yes

If transfer to **ON Schedule 1.1 LIF:** What is income earned on Schedule 1 LIF, Schedule 1.1 LIF or LRIF transferred amounts during year of transfer? \$ _____

If transfer to **NL LRIF:** What is income earned on LIF transferred amounts during year prior to year of transfer? \$ _____

If transfer to **MB LIRA/LIF:** The annuitant has or has not made a One-time transfer with our organization or that we are aware of.

If transfer to **AB LIF:** What is income earned on LIF transferred amounts during year of transfer? \$ _____

If transfer to **AB or MB LIF:** What is the annual maximum payment for the year (LIF to LIF)? \$ _____
What amount of the annual maximum has been received by the annuitant (LIF to LIF)? \$ _____

Pension Jurisdiction (Provincial or Federal Act) _____

- Name of Company where individual was employed: _____
- Province where individual worked at termination: _____ Position Held: _____

Original RPP Name: _____

- Name/Address of Pension Plan Administrator: _____
- Year funds transferred out of pension plan: _____ Retirement Age specified under RPP: _____ (Normal) _____ (Early)
- Marital Status: _____ Annuity Rate Breakdown: \$ _____ (Unisex) \$ _____ (Sex Distinct)
(MB Jurisdiction Only)

- PEI and Federal Non-PBSA, 1985 Jurisdictions ONLY: Does the pension plan provide for release of funds if a medical practitioner provides a statement that the member's life expectancy has been shortened considerably? No Yes (copy of applicable section of RPP enclosed)

Date (DD/MMM/YYYY) _____ (Authorized Signature of Transferor Institution) _____ (Contact Phone Number) _____