

Instructions for a transfer from another institution

Beneva Investment Accounts, Beneva GIAs and Beneva Equity Index GIAs

Beneva inc., P.O. Box 10510, Station Sainte-Foy, Quebec, QC G1V 0A3

	Contract No.:								
1. Contractholder's Identification									
			_						
Last name		First nam	e						
2. Plan Details (C	Check one box only)								
1. The amounts come from sums a 3. Transfer Types	sal RRSP al RRIF LIF1 RLSP1 OR LRIF1 (Newfoundland cquired from the pension plan of a former spouse f	iollowing a separation or death. Attach a copy of t							
,	nvestment instructions secti	on.							
Transfer from another in	stitution or an employer – Attac	ch a copy of the form							
Type of form:									
Amount:	\$	\$	\$						
Name of financial institution or employer:									



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4. Investment Instruction

			Amount 🗌 💲 or [□ %				
Raily Interest Account								
			T					
Beneva GIAs and Beneva	400 \$ minimum per CIG	Investment maturity date (YYYY/MM/DD)	Compound Interest (C) or Simple Interest with annual		For Eq	For Equity Index GIAs ³ only		
							Garantee at	
quity Index GIAs	Amount 🗌 \$ or 🗌 %	or term	payment ² (S)	(NR)	Index	(maturity (%	
Beneva Investment					Code		Amount ☐ \$ or ☐ % \$400 minimum	
Accounts redeemable (R)¹					Code		oo miimiimam	
				1				

- 1. Redeemable investment subject to the applicable fees and penalties
- Direct Deposit (attach a cheque specimen)
 Compound interest (C) only for Equity Index GIAs



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5. Important Notice

Amounts invested in Beneva investment accounts are not guaranteed, except in the event of the death of the contractholder, except a minimum given percentage of contributions in the event of the death of the contractholder or at the maturity of the guarantee (refer to the Savings Annuity Contract for more information). Any investment in these accounts is made with Beneva (the Insurer) and does not confer any entitlement to the reference fund securities. Amounts invested in these accounts are invested in the Insurer's general funds. The Insurer subdivides the amounts invested into units. These units, which are not securities, are issued solely for the purpose of making it easier to track future fluctuations in the value of your investment. The Insurer establishes the initial value of the units granted to you at the time of your investment. Any returns generated by these accounts are tied to the performance of a market index or reference fund, less any applicable management fees. Market index or reference fund performance fluctuates depending on the market value of the securities that make up the fund. Depending on the market index or reference fund performance, the account balances may, therefore, increase or decrease on a daily basis and may even fall below the amounts invested, if the rate of return, after deduction of management fees, is negative. If the market index or reference fund becomes unavailable or the Insurer ceases to use it as a market index or reference fund, for any reason whatsoever, the latter reserves the right to replace it with another market index or reference fund it deems similar or to determine the applicable rate of return.

Transfer fees: This investment may be redeemed or transferred at any time, subject to transfer fees.

6. Contractholder's Declaration

- I have verified the information contained in this application and certify it to be true and complete.
- I acknowledge that I have read and understood the Important Notice section.
- I agree to pay any fees and penalties applicable to this transfer, if applicable.
- I certify that my signature, if affixed electronically, has the same legal value as my handwritten signature. Any reproduction of this form whose integrity is ensured has the same legal value as the original.

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Signature of contractholder	Date
x	[Y,Y,Y,Y] $[M,M]$ $[D,D]$
Signature of co-contractholder (where applicable)	Date
7. Advisor's Declaration	
I declare that I obtained prior specific authorization from the contract and penalties.	etholder for this instruction form and that I informed the contractholder of any applicable fees
 I certify that my signature, if affixed electronically, has the same legal ensured has the same legal value as the original. 	al value as my handwritten signature. Any reproduction of this form whose integrity is
	Code: or or
Advisor's name	Dealer Advisor Agency No. Advisor No.
X	[Y,Y,Y,Y]M,M[D,D]
Advisor's signature	Date

Protecting your personal information is a priority for Beneva. To find out more about our practices, please consult the *Personal Information Protection Statement* located at www.beneva.ca.

