



TRANSFER AUTHORIZATION FOR REGISTERED AND NON-REGISTERED INVESTMENTS

NCM Asset Management Ltd. c/o CIBC Mellon GSS, Recordkeeping 1 York St. Suite 900, Toronto, ON M5J 0B6 Fax: 1.855.884.0493

Clear Form

1. Annuitant Information Mr. Mrs. Ms. Dr. Preferred language of correspondence English or French

Last Name First Name Initial(s)

Address City Province Postal Code

Home Telephone Number Date of Birth Social Insurance Number (Mandatory)

Non-Registered Accounts Only - Joint Accounts

Last Name First Name Social Insurance Number (Mandatory)

2. Receiving Institution Information

NCM Asset Management Ltd. c/o CIBC Mellon GSS, Recordkeeping 1 York St. Suite 900, Toronto, ON M5J 0B6

For new accounts, please attach completed NCM Account Application

NCM Account Number (if existing)

Registered Plan Type: RRSP Spousal RRSP RRIF Spousal RRIF TFSA LIRA LRSP RLSP LRIF LIF RLIF Non-Registered

Dealer Name Dealer Number Dealer Account Number

Financial Advisor Name Rep code Telephone Number

Investment Instruction

Table with 6 columns: Fund Name, Fund Number, Amount (\$), Amount (%), FE SC %, LL

Special Instructions:

Locked-in Confirmation. NCM Asset Management Ltd. as agent for CIBC Mellon Trust Company as Trustee, agrees to administer all locked-in funds transferred under this transfer authorization in accordance with the governing legislation indicated in Section "5" below.

3. Client Direction to Relinquishing Institution

Relinquishing Institution Name

Address

City Province Postal Code Client Account Number

Transfer (check one box only) All in cash* All assets*, but mixed in Cash and in Kind (for units of NCM Funds only). See list below or attached list. All in Kind (for units of NCM Funds only) Partial* as listed below or on attached list.

*Please refer to statement in bold in Client Authorization section below

Table with 4 columns: In Kind, In Cash, Investment Amount, Account Number or Policy Number

4. Client Authorization

I hereby request the transfer of my account and its investments as described above. I acknowledge that all investments in my NCM RSP, or RIF or TFSA must be made through a registered Dealer and that the Dealer noted above is acting as my agent in this regard.

*WHERE I HAVE REQUESTED A TRANSFER IN CASH, I AUTHORIZE THE LIQUIDATION OF ALL OR PART OF MY INVESTMENTS AND AGREE TO PAY ANY APPLICABLE FEES, CHARGES OR ADJUSTMENTS.

Signature of Annuitant Date Signature of Irrevocable Beneficiary (if applicable) Date

Signature of Joint Applicant (for Non-Registered Accounts) Date

5. For Use By Relinquishing Institution Only

Registered Plan: RRSP RRIF Qualified Non Qualified Spousal Plan No Yes - if yes, complete Contributor information TFSA Non-Registered LIRA LRSP RLSP LRIF LIF PRIF RLIF Locked-in funds: \$ Governing Legislation

Contributor Last Name First Name Initial(s) Date of Birth Social Insurance Number

Contact Name Telephone Number Fax Number

Authorized Signature Date