



130 Adelaide Street West
4th Floor
Toronto, Ontario
M5H 3P5
Tel.: 416.947.7427
Toll Free: 1.800.263.8349

FINANCIAL ACCOUNT CHANGES

FAX TO: 416.947.9476

TOLL FREE FAX: 1.866.941.7711

CLIENT AND ACCOUNT IDENTIFICATION

B2B Trust Account Number

Account Type: RSP Spousal Locked In LIRA
 RIF LIF MF Loan (OPEN)

Client's Last Name

Client's First Name

Joint Client Name for Loan Account (if applicable)

This form is being submitted to B2B Trust as follows:

Copy by facsimile (FAX) Original by mail or courier

Use one method only to prevent duplication

REDEMPTION INSTRUCTIONS

Fund Code (MANDATORY)	Mutual Fund A/C No.	Net Dollar Amt after DSC fees	Gross Dollar Amt before DSC fees	Number of Units	Number of Free Units	Percentage of Fund	Wire Order No.
						%	
						%	
						%	
						%	
						%	

RIF SCHEDULED REDEMPTION ADJUSTMENT (ENSURE THAT DOLLAR/PERCENTAGE AMOUNTS TOTAL THE PAYMENT AMOUNT OR 100%)

Fund Code (MANDATORY)	Amount \$ or %	Fund Code (MANDATORY)	Amount \$ or %	Fund Code (MANDATORY)	Amount \$ or %
	\$		\$		\$
	%		%		%
	\$		\$		\$
	%		%		%
	\$		\$		\$
	%		%		%

PURCHASE INSTRUCTIONS

Source of Funds: Cheque Proceeds from Redemption Transfer Authorization for Registered Investments
 Cash in Account Loan T2151/TD2 Agent # (GIC) _____

Fund Code (MANDATORY)	Mutual Fund A/C No.	Amount (\$ or %)	Commission Rebate (\$ or %)	Initial Charge/ Interest Rate	Deferred Charge	Option No./ Term	Wire Order No.
				%			
				%			
				%			
				%			
				%			

SWITCH INSTRUCTIONS (THIS SECTION IS USED TO SWITCH WITHIN A FAMILY OF FUNDS. USE REDEMPTION/PURCHASE IF SWITCHING BETWEEN FUND COMPANIES.)

FROM:			TO:				
MANDATORY			MANDATORY				
Amount or Percentage	Fund Code	Fund Account No.	Amount or Percentage	Fund Code	Fund Account No.	Sales Charge	Wire Order No.
						%	
						%	
						%	
						%	
						%	

WITHDRAWAL INSTRUCTIONS (WITHDRAWALS FROM REGISTERED PLANS ARE SUBJECT TO TAXES AND SERVICE FEES.)

Withdraw total received from above redemption(s) Mail cheque to client at address on account ICS cheque to Advisor
 Withdraw specified amount gross (before taxes & fees) Withdraw specified amount net (after taxes & fees) EFT to client's bank account (void cheque attached)
\$ _____ \$ _____

SPECIAL INSTRUCTIONS

CLIENT AUTHORIZATION (THE UNDERSIGNED AUTHORIZES EXECUTION OF THE CHANGES NOTED.)

M M D D Y Y Y Y

Date Completed

Signature of Client _____

Signature of Joint Client (if applicable) _____

Signature of Advisor _____

Signature Guarantee _____

Dealer/Advisor _____