Import Data Reset Form PRINT LETTER SIZE

TD Asset Management
Pre-Authorized Debit (PAD) Agreement

Send completed forms to: **TD Mutual Funds, C/O Mutual Fund Operations, 77 Bloor St. W., 2nd Floor, Toronto, ON M5S 1M2**

This form is not applicable for LIRA/LRSP/RLSP/RIF/LIF/PRIF/RLIF accounts

Part 1: Investor Information

Account #

First Name Last Name **OR** Corporation Name

Joint First Name (if applicable) Joint Last Name (if applicable)

Part 2: Investment Information

Please choose one of option A or B or both below (please refer to the available frequencies for the Fund(s)/Portfolio(s) selected)

A: One Time – please note for option A, a new PAD agreement is required for each one-time request

Start Date: ______/____/___
YYYY/MM/DD

Fund/Portfolio #	Fund/Portfolio Name	ISC	Sales Charge %	Percentage	Amount
		❑			$
		❑			$
		❑			$
		❑			$
			Totals	0.00%	$ 0.00

B: Set Interval

❑ **Weekly** ❑ **Bi-weekly** ❑ **Semi-monthly*** ❑ **Monthly**

❑ **Bi-monthly**** ❑ **Quarterly** ❑ **Semi-annually** ❑ **Annually**

***Semi-monthly are purchases made on the 1st and 15th of each month, or the first business day thereafter.**

****Bi-monthly are purchases made every other month.**

Start Date: ______/____/___
YYYY/MM/DD

Fund/Portfolio #	Fund/Portfolio Name	ISC	Sales Charge %	Percentage	Amount
		❑			$
		❑			$
		❑			$
		❑			$
			Totals	0.00%	$ 0.00

Part 3: Banking Information

Please attach a void cheque OR complete this section

Financial Institution Institution Number Branch Transit Number

Currency ❑ CDN$ ❑ US$ Account Number ❑ Savings ❑ Current ❑ Chequing

Account Holder Name(s)

Branch Address City Province Postal Code

Part 4: Terms and Conditions

You authorize TD Asset Management Inc. ("TDAM") to debit your bank account at the financial institution ("Bank Account") indicated in Part 3 of this Pre-authorized Debit Agreement ("Agreement") for the amounts and on the frequencies instructed for the purchase of the TD Funds. You assure us and warrant that all persons whose signatures are required to debit the Bank Account have signed this Agreement or provided a separate authorization.

You agree to the provisions of these Terms and Conditions and allow TDAM to process one or more pre-authorized debits as outlined in Part 2 of this Agreement. You understand that if this Agreement is for a one-time PAD as selected above, then this Agreement will no longer be valid once the payment has been fulfilled. Any subsequent PADs will require a new Agreement. If this Agreement is for your own personal investment, your debit will be considered a personal PAD. If this Agreement is for business purposes, it will be considered a business PAD.

This Agreement applies if your Financial Advisor or Dealer opens this Account for you in "Client Name". In any other circumstance, you will have a separate agreement with your Financial Advisor or Dealer that will outline how payments from your Bank Account are to be made for purchase and redemption transactions. You authorize TDAM to accept changes to this Agreement from your Financial Advisor or Dealer.

This Agreement may be cancelled by you at any time upon 30 days notice prior to the next scheduled PAD. Such notice may be in writing or may be given orally (if we are able to verify your identity). To obtain a sample cancellation form or for more information regarding your right to cancel this Agreement, please consult with your financial institution or visit www.payments.ca. Termination of this Agreement does not terminate or modify any other agreements you may have with TDAM.

You must provide TDAM with 30 days notice (written or by phone) prior to the next scheduled PAD regarding any change to your PAD instructions or this Agreement. You must immediately notify TDAM of any changes to your Bank Account Information.

You have certain recourse rights if any debit does not comply with this Agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit www.payments.ca.

You acknowledge that TDAM has the right in its sole discretion to cancel a PAD or to terminate this Agreement. You further acknowledge that TDAM may terminate this Agreement without notice if TDAM is unable to debit the bank account in the full amount specifically authorized on any due date. TDAM may cease issuing PADs in accordance with Payments Canada's Rule H1.
You acknowledge you have read and understand all the provisions contained in this Agreement. You confirm that you have received a copy of this Agreement.

Waiver of Pre-notification/Confirmation Periods

You hereby agree to waive your right to receive pre-notification of the amount and timing of the PAD(s) and agree that you do not require advance notice of the amount of the PAD(s) before the debit is processed or in the event of a change in the amount or timing of a PAD.

You further waive all confirmations required from TDAM to the extent permitted under Payments Canada's Rule H1.

X	YYYY/MM/DD
Signature of Payor	Date
X	YYYY/MM/DD
Signature of Joint Applicant/Contributing Spouse or Common-law Partner (if applicable)	Date

Dealer Name	Dealer Number	Representative Name	Representative Number

TD Mutual Funds, C/O Mutual Fund Operations, 77 Bloor St. W., 2nd Floor, Toronto, ON M5S 1M2
TD Mutual Funds Client Services 1-800-588-8054