

Complete this form if you want to:

- make regular contributions to your Registered Savings Plan (RSP), Tax-Free Savings Account (TFSA) or Non-Registered Savings Account (NRSA) directly from your bank account.
- begin, change or stop contribution deductions from your bank account, or make one, lump sum payment.

You can find this form online by signing in to your account with your Manulife ID at manulifeim.ca/retirement. Look for Forms under 'Quick links' or 'Helpful information' on your homepage.



Don't have a Manulife ID yet?

Sign up now to access your account anytime on our secure website. Go to manulifeim.ca/retirement, click 'Sign in' and follow the instructions to set up your Manulife ID.

Please print clearly in the blank boxes. Remember to sign and date the form.

Need help? Contact Customer Service at 1-888-727-7766.

For Quebec residents only: As per Quebec law, forms are available to you in both French and English. If you do not indicate your preferred language, we will continue to communicate with you in French or English, as per your previous language preference selection.

1. Plan Sponsor/Employer information

Plan Sponsor/Employer		Group policy number	Customer number* 10 _____
Last name		First name	Middle Initial
Mailing address (number, street, and apartment)			
City	Province	Country	Postal code
Telephone number*	Ext*	Personal e-mail address	
<p>This question is only required if making a contribution to your Non-Registered Savings Account.</p> <p>Are you a U.S. citizen or a U.S. resident for tax purposes? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, provide your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN): _____</p>			

*See online account or statement for details.

2. Identity document

This section is only required if making a contribution to your Non-Registered Savings Account or Tax-Free Savings Account.

Choose one Government Issued Identification		
<input type="checkbox"/> Canadian passport <input type="checkbox"/> Birth certificate <input type="checkbox"/> Driver's license <input type="checkbox"/> Canadian citizenship card <input type="checkbox"/> Other		
Document number	Expiry date	Issuing Province

3. Your contribution deduction information

Note: A minimum of \$25 per frequency is required.

Exception: For one-time lump sum contributions, a minimum amount of \$100.00 is required.

Pre-notification: You acknowledge that you have waived your right to receive pre-notification of the amount of the PAD and agree that you do not require advance notice of the amount of PADs before the debit is processed.

I would like to: <input type="checkbox"/> Begin deductions <input type="checkbox"/> Change deductions <input type="checkbox"/> Stop deductions		
I hereby authorize Manulife to deduct from my bank account and allocate to my savings account.	\$	Please start contributions on (dd/mmm/yyyy)

Indicate how frequently you would like to contribute to your Savings account beginning on the date above unless specified otherwise.

<input type="checkbox"/> Weekly	<input type="checkbox"/> Bi-weekly	<input type="checkbox"/> Monthly
<input type="checkbox"/> Month end	<input type="checkbox"/> Quarterly	<input type="checkbox"/> One-time lump sum contribution withdrawn from my account within 2 business days following receipt by Manulife

4. Your banking information

To verify your banking information, please attach a blank cheque marked VOID. Manulife is hereby authorized to begin deducting contributions from your account once we have received and verified your banking information.

Name of bank (exact name where account is being held)				
Address of bank (where account is being held)				
City or town	Province	Postal code	Telephone number	Ext
Transit number			Account number	Account type
Name of depositors as on bank records (last, first, middle initial)				
Name of depositors as on bank records (last, first, middle initial)				

Example

Manulife Bank
 500 KING ST. NORTH
 WATERLOO, ONTARIO N2J 4C6

MEMO _____

⑈ 108 ⑈ ⑆ 0 1 1 2 2 ⑆ 5 4 0 ⑆ 0 0 0 1 1 ⑆ 0 0 1 1 1 ⑈

Transit number
Institution number
Account number

The illustration shows the MICR encoding used on standard cheques. The labels help you identify the codes to enter in the following table.

5. Your lump sum contribution

The minimum amount you can invest in a fund is 5%.

Percentages must be in whole numbers.

If your plan offers Group IncomePlus note this option is intended to provide you with guaranteed retirement income. Before you select Group IncomePlus, review *The Bold Print*—a separate document that you'll find on the secure site under the 'Plan for Retirement' section OR at manulife.ca/groupincomeplus.

If your one-time lump sum contribution is directed towards Group IncomePlus, please remember that a contribution exceeding 20% of your Guaranteed Income Base will reset your Minimum Five (5) Year Holiday period whether you make one large contribution or a series of smaller transfers and contributions.

Please process this contribution using the following fund direction:

Same as my current fund direction or As indicated below:

Total amount of contribution \$ _____

Investment direction(s) for Pre-Authorized Cheque Request

Fund code names and contribution details appear online at www.manulife.ca/GRO or in the Group Investment Report.

Fund code	Fund name	\$	%
		\$	%
		\$	%
		\$	%
		\$	%

		\$		%
Total must equal 100%				%

6. Please sign here



For a joint account that requires multiple signatures, all depositors must sign this authorization.

I request and authorize Manulife to debit my bank account listed above for a pre-authorized Cheque (PAC) plan. I further authorize the financial institution indicated above to process these withdrawals in accordance with instructions provided by Manulife. It is understood and agreed that:

- My account information will apply to contributions after the information has been received and verified by Manulife, in accordance with its practices and procedures.
- Pre-notification: You acknowledge that you have waived your right to receive pre-notification of the amount of the PAD and agree that you do not require advance notice of the amount of PADs before the debit is processed.
- My account authorization may be terminated by me upon written notification. Termination will take effect within 30 business days of receipt of written notification at the address at the end of this form (as may be amended from time to time).
- A sample cancellation form, or further information on my right to cancel this PAC is available from Manulife or by visiting www.payments.ca.
- If, for any reason, a withdrawal against my account is not honored, I understand Manulife reserves the right to charge a fee of \$25 for handling these returned items (as may be amended from time to time).
- I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAC Agreement. Contact Manulife or visit www.payments.ca to obtain more information on your recourse rights.

I hereby certify that the information on this form is correct to the best of my knowledge.

If I have selected Group IncomePlus, I acknowledge that I have read and understood *The Bold Print* (a separate document that you'll find on the secure site under the 'Plan for Retirement' section or at manulife.ca/groupincomeplus) and by signing below, I agree to the terms, conditions, and fees applicable to that option.

Signature of bank depositor (on bank records)	Date signed (dd/mmm/yyyy)
Signature of bank depositor (on bank records)	Date signed (dd/mmm/yyyy)
Your signature	Date signed (dd/mmm/yyyy)

Personal information

We collect, use, and disclose your personal information for the purpose of processing your request. We disclose your personal information to authorized employees, agents, representatives, financial institutions and other parties with whom we deal with in issuing and administering your product(s) and services, now and in the future. Also, we disclose your personal information to service providers who require this information to perform their services for us (for example data processing, programming, data storage, and printing). Unless there are contractual limitations, your personal information may be accessed or transferred within or outside Canada and may be subject to the laws of those jurisdictions. You may withdraw your consent subject to legal and contractual restrictions. You also have the right to access and correct your personal information maintained in our files. For further information you can review our Privacy Policy or email us at Canada_Privacy@manulife.ca.

Send us your documents online



It's faster and safer than email or regular mail.

From your Manulife Mobile app, sign in with your Manulife ID (choose Group Retirement). From the top left menu, select your name to get to your profile, then select **Send documents**.

or

From your desktop or tablet, sign in to your account at manulifeim.ca/retirement using your Manulife ID. Look for **Send documents** on your homepage under 'Quick links' or 'Helpful information'.

If you need to mail the form, send it to one of the addresses below.

Outside of Quebec:

Manulife
Group Retirement
P.O. Box 396
Waterloo, ON N2J 4A9
Fax: 1-866-945-5110

Quebec:

Manulife
Group Retirement
2000 Mansfield, Suite 1410
Montréal, QC H3A 3A2
Fax: 1-866-945-5109