



RETIREMENT INCOME FUND (RIF) PAYMENT CHANGE FORM

Form 302.19 01/22

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

Use this form to update your RIF Payment information

1. ACCOUNT DETAILS

Account Holder/Annuitant Name (First, Initial, Last) Account Number

Account Type: RIF Spousal RIF LIF/LRIF RLIF PRIF

2. ANNUAL PAYMENT INFORMATION

I request in each year, an **annual payment** amount of (*select one*):

- Minimum amount payable
- Other Amount: \$ _____ Gross Net
- Maximum payout (LIF, LRIF and RLIF only)

Tax Calculation options

- Regulatory Standard (default)
- Percent _____ %: On entire amount On excess amount

3. PAYMENT SCHEDULE

- Payment Frequency: Monthly Quarterly Semi-Annually Annually
- Start Date: 15th Last day of the month Year _____ Month _____
- Direct Payment: by Electronic Funds Transfer to my bank account on file (If new, attach an original void cheque)
- to my online brokerage non-registered account number: _____

4. FUND REDEMPTION SELECTION

Use this section if you wish to sell Mutual Funds to complete your RIF payment.

Type ¹	Fund Name	Fund Code	Investment Amount (percentage required)
			%
			%
			%
			%
			%
			%

¹Type: Start, Stop, Change

5. ACCOUNT HOLDER/ANNUITANT AGREEMENT (READ CAREFULLY BEFORE SIGNING)

I agree to indemnify and save harmless the Trustee and the agent of the Trustee, in respect to all taxes, assessments and other charges levied or imposed by any competent authority, with regard to my account, at any time. By signing and dating below, I acknowledge, agree and consent to all of the foregoing and confirm that the information I have provided is correct.

I acknowledge that all fund transfers are governed by, and confirm that I have read, understood and agree to the Broker's *Customer Agreements & Disclosure Documents* and *Terms of Use* (all of which are incorporated herein by reference) as such agreements may be amended from time to time, a copy of which has been provided to me and which can be found online.

x _____
Account Holder/Annuitant Signature Date (dd/mm/yyyy)