



TO: League Savings and Mortgage Company (referred to as the Issuer)

THE UNDERSIGNED *(insert names of all heirs of deceased)*:

hereby state:

1 The deceased _____ late of _____, in the Province of _____ died in the _____ on the _____ day of _____, 20____ holding contract(s) and amount(s) under the League Savings and Mortgage Retirement Income Fund as follows:

Contract #(s) _____	Amount \$ _____
Contract #(s) _____	Amount \$ _____
Contract #(s) _____	Amount \$ _____

(Strike out a) or b) as required and initial alteration)

2 a) The deceased left a Will dated the _____ day of _____, A.D. _____, wherein _____ was appointed as executor thereof, and:

- i) the deceased left no other Will or other testamentary document.
- ii) it is desired to eliminate the expense of acquiring Letters Probate of the said Will of the deceased and no application for Letters Probate or Letters of Administration with Will Annexed of the deceased has been made or intended to be made in any jurisdiction, and
- iii) a notarial copy of the said Will is deposited herewith.

b) The deceased died intestate and

- i) the undersigned are the sole heirs of the deceased.
- ii) excepting any of the undersigned, there are no other children of the deceased nor any children of a deceased child of the deceased.
- iii) it is desired to eliminate the expense of acquiring Letters of Administration of the estate of the deceased and no such application has been made or intended to be made in any jurisdiction, and
- iv) the relationship of the undersigned to the deceased is as follows:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

(SEE OVER)

DIRECTION/INDEMNITY AGREEMENT

- 3 Proof of death is provided herewith.
- 4 All debts of the estate have been paid in full.
- 5 The net value of all property passing at the death of the deceased was approximately \$_____.

THE UNDERSIGNED HEREBY REQUESTS the Issuer to transfer the entire balance of the RIF Contract:

- In accordance with the Designation of Beneficiary
- Payment by cheque to the deceased's spouse
- Transfer to a RRIF in the name of the deceased's spouse
- Payment by cheque to the named beneficiary
- Payment by cheque to the deceased's estate.

without requiring Letters Probate or Letters of Administration of the estate of the deceased.

IN CONSIDERATION of the Issuer complying with the above request each of the undersigned severally covenants and agrees for himself or herself and his or her heirs, executors and administrators with the Issuer, their successors and assigns, to indemnify and hold them harmless from and against all actions, suits and other proceedings whatsoever which at any time hereafter shall or may be brought or prosecuted against the Issuer, their successors or assigns, arising out of the transfer or payment as requested.

IN WITNESS WHEREOF, each of the undersigned has affixed his or her signature this _____ day of _____, 20_____.

in the presence of

(Witness)

(Signatures)

(SEE OVER)

DECLARATION

(This Declaration is to be sworn by the executor named at 2 a) or by one of the heirs named at 2 b))

I, _____, do solemnly declare that I have personal knowledge of the facts represented in the foregoing Direction/Indemnity Agreement and that all such facts are true and correct and that I am not in possession of any other facts or information which would have any effect on entitlement to the proceeds.

I MAKE THIS SOLEMN DECLARATION CONSCIENTIOUSLY believing it to be true and knowing it is of the same force and effect as if made under oath and by virtue of the "Canada Evidence Act".

Declared before me at the _____)
of _____, in the)
Province of _____,)
This _____ day of _____,)
A.D. 20____.)

_____)
Claimant

Commissioner for Oaths/Notary Public

- Note:
- * Any alterations must be initialled by both the Claimant and Commissioner for Oaths/Notary Public.
 - * Where this document is being sworn outside the province where the issuer is located, it must be sworn in the present of a Notary Public.