



**PART 1: CLIENT/ANNUITANT INFORMATION**

LAST NAME		FIRST NAME		INITIAL	SOCIAL INSURANCE NUMBER
STREET					
CITY		PROVINCE	POSTAL CODE		TELEPHONE NUMBER

**TRANSFER MY:**

RSP    LIRA/LIRSP    RIF    LIF    RLSP    RLIF    TFSA    DPSP    PENSION    RETIRING ALLOWANCE  
 FULL TRANSFER    PARTIAL TRANSFER OR LUMP SUM OF \$    IN CASH

<b>FROM:</b>	TRANSFEROR (RELINQUISHING) INSTITUTION NAME				
	STREET				
	CITY		PROVINCE	POSTAL CODE	
	CONTRACT/PLAN #		DEPOSIT #	MATURITY DATE (MM/DD/YY)	

<b>TO:</b>	LEAGUE SAVINGS AND MORTGAGE COMPANY		CONTRACT/PLAN #		
	6074 LADY HAMMOND RD, HALIFAX, NS B3K 2R7		<b>TICK APPLICABLE SPECIMEN PLAN:</b> <input type="checkbox"/> RSP 421-1 <input type="checkbox"/> SPOUSAL RSP 421-1 <input type="checkbox"/> LIRA 421-1 <input type="checkbox"/> RIF 210 <input type="checkbox"/> SPOUSAL RIF 410 <input type="checkbox"/> LIF 210 <input type="checkbox"/> TFSA 04210019		
	PHONE: (800) 668-2879 FAX: (866) 860-3116				

IF FROM RPP/DPSP:  I AM THE MEMBER OR  THE BENEFICIARY SPOUSE\*\* OR  FORMER SPOUSE\*\* DUE TO BREAKDOWN OF MARRIAGE OR  COMMON LAW PARTNER  
 \*\*OR OTHER INDIVIDUAL WHO HAS BEEN GIVEN SIMILAR RIGHTS UNDER APPLICABLE LEGISLATION

CLIENT/ANNUITANT SIGNATURE		DATE (MM/DD/YY)
(OR, <input type="checkbox"/> SEE LETTER ATTACHED)		
CERTIFIED BY: AUTHORIZED AGENT NAME AND PHONE NUMBER		LEAGUE SAVINGS AND MORTGAGE (TRANSFEREE INSTITUTION)

**PART 2: COMPLETED BY TRANSFEROR (RELINQUISHING) INSTITUTION**

AMOUNT TRANSFERRED \$ (TRANSFEROR TO ISSUE T4RIF FOR TRANSFERS FROM RRIF TO RRSP OR T4 FOR RETIRING ALLOWANCE TRANSFER)

SPOUSAL PLAN (N/A FOR TFSA)  NO  YES - IF YES, COMPLETE:

CONTRIBUTOR LAST NAME	FIRST NAME	INITIAL	SOCIAL INSURANCE NUMBER
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LOCKED IN FUNDS  NO  YES - IF YES, COMPLETE PENSION INFORMATION BELOW:

RETIRING ALLOWANCE: AMOUNT TO BE REPORTED IN BOX 26 (ELIGIBLE RETIRING ALLOWANCE) OF THE EMPLOYEE'S T4A SLIP \$

FROM RRIF: THE TRANSFER IS FROM A QUALIFYING PRE-1993 RRIF  NO  YES

FROM RPP: WE DID NOT TRANSFER \$ OF THE AMOUNT IN ACCORDANCE WITH SUBSECTION 147.3(1) TO (7) AND WILL REPORT THIS AMOUNT AS INCOME OF THE APPLICANT ON A T4A SLIP

FROM TFSA: THE VALUE OF PROPERTY IN THE HOLDER'S TFSA JUST BEFORE THE TRANSFER WAS \$

**COMPLETE IF AMOUNTS ARE LOCKED-IN UNDER PENSION LEGISLATION**

LOCKED-IN PENSION AMOUNT \$

HAVE FUNDS BEEN HELD IN A LIF/LRIF/RLIF AT ANY TIME DURING YEAR OF TRANSFER?  NO  YES

FUNDS ORIGINATED FROM PENSION FUND

PENSION LEGISLATION (ATTACH COPIES OF DOCUMENTATION TO SUPPORT THE JURISDICTION)

ANNUITY RATE BREAKDOWN	\$ (UNISEX)	\$ (SEX DISTINCT)
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DATE (MM/DD/YY)	AUTHORIZED SIGNATURE OF TRANSFEROR INSTITUTION	TELEPHONE NUMBER
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