

DIRECT TRANSFER

PART I – Annuitant Request

(Name) _____ (Social Insurance Number) _____ (Telephone) _____

(Address) _____

(Name and Address of Issuer) _____

(Contract #) _____ (Deposit #) _____ (Maturity Date of Deposit) _____

PLEASE TRANSFER IN CASH: All of the property OR Partial (Amount/Details):

FROM the above RRSP Spousal RRSP RRIF RPP DPSP LIF LRIF TFSA

To: **Achieva Financial, P.O. Box 2729, Winnipeg, Manitoba, R3C 4B3 (1-877-224-4382)** ACCOUNT# _____

Credit Union Retirement Savings Plan RSP 145-658 Credit Union Retirement Income Fund RIF – 988 CU Tax Free Savings TFSA01450014
Trustee: Concentra Trust

If from RPP: I am the member OR the beneficiary spouse OR Former spouse due to marriage breakdown

If from DPSP: I am the member OR the beneficiary spouse

(Date) _____ (Annuitant Signature) _____ or see attached letter

Authorized Signature by Transferee _____

Part II – Transferor Institution

Amount transferred \$ _____ (Transferor to issue a T4RIF for transfers from RRIF to RRSP, or T4A for transfer of Retiring Allowance)

Spousal Contributions: No Yes Contributor Name: _____ SIN: _____

Locked-in Funds: No Yes (if yes, complete pension information below)

Retiring Allowance: Amount to be reported in Box 26 (Eligible Retiring Allowances) of the employees 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 subsections 147.3(1) to (7) and, we will report this amount as the applicant's income on a T4A slip.

Is this a transfer from a Prescribed Manitoba RRIF? No Yes

Complete the following if any amounts are Locked-in under Pension Legislation:

Locked in Pension Amount \$ _____ Have funds been held in a LIF/LRIF in year of transfer? No Yes

If transfer to **ON LRIF**:
1) What is income earned on LIF/LRIF transferred amounts during year of transfer? \$ _____
2) What is the "maximum room" carry forward amount from LRIF \$ _____

If transfer to **AB or NF LRIF**: What is income earned on LIF transferred amounts during year prior to year of transfer? \$ _____

If transfer to **MB LRIF**: What is income earned on LIF transferred amounts during year of transfer? \$ _____

Pension Jurisdiction (Provincial or Federal Act)

- Name of Company where individual was employed: _____
- Province where individual worked at termination _____

Position Held _____

Original RPP Name:

- Name/Address of Pension Plan Administrator: _____
- Year funds transferred out of pension plan: _____

- Retirement Age specified under the RPP: _____

- Marital Status: _____

(MB Jurisdiction only)

Annuity Rate Breakdown: \$ _____ (Normal) \$ _____ (Early)
(Unisex) (Sex Distinct)

- PEI and Federal Non-PBSA, 1985 Jurisdictions ONLY: Does the pension plan provide for release of funds if a medical practitioner provides a statement that the member's life expectancy has been shortened considerably? No Yes (copy of applicable section of RPP enclosed.)

Date _____ Authorized Signature of Transferor Institution _____ Print Name _____ Contact Phone # _____

PLEASE RETURN THIS FORM WITH THE CHEQUE



Please indicate where you would like your TFSA funds once they are transferred to our office and return with the Direct Transfer-In of TFSA Form.

TFSA Savings

TFSA GIC

Compounding or Paid Annually

***Interest paid annually will go into a TFSA Savings.**

Select GIC Term

1yr 2yr 3yr 4yr 5yr