

Take your RRSP to the limit

Lump sum contribution form

Please print clearly in the blank boxes.

To make a lump sum contribution to your Manulife Financial Group RRSP:

1. Complete this lump sum contribution form.
2. Write your group policy number on the back of your cheque.
3. Attach your cheque made payable to Manulife Financial to your completed form.

Mail to:

Manulife Financial
Attn: GSRS Client Services
Delivery Station KC6
P.O. Box 396, STN WATERLOO
WATERLOO ON N2J 4A9

Courier to:

Manulife Financial
Attn: GSRS Client Services
Delivery Station KC6
25 Water Street South
KITCHENER ON N2G 4Y5

If you live in Eastern Ontario, Quebec and Atlantic Canada mail or courier to:

Manulife Financial
Group Savings and Retirement Solutions
2000 Mansfield, Suite 1410
MONTREAL QC H3A 3A2

This form is also available online at www.manulife.ca/GRO

Your personal information

Plan Sponsor/Employer			Group policy number		Customer number	
Last name			First name		Middle initial	
Mailing address (number, street and apartment number)						
City	Province	Country	Postal Code	Telephone number*	Ext. *	

*These fields are optional.

If your plan offers Group IncomePlus note this option is intended to provide you with guaranteed retirement income. Before you select Group IncomePlus, learn more at www.manulifegroupincomeplus.ca

If your lump sum contribution is directed towards Group IncomePlus, please remember that a contribution exceeding 20% of your Guaranteed Benefit Base will reset your Minimum Five (5) Year Holding period whether you make one large contribution or a series of smaller transfers and contributions over a 365 day period.

Your lump sum contribution

Please process this contribution using the following fund direction:

Same as my regular contribution

OR

As I have indicated below

Total amount of contribution \$ _____

Investment direction(s) for the lump sum contribution only

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

Fund code	Fund name	\$	%
		\$	%
		\$	%
		\$	%
		\$	%
		\$	%
		\$	100% %

Must equal 100%

Please sign here

If I have selected Group IncomePlus, I acknowledge that I have read and understood The Bold Print and by signing below, I agree to the terms, conditions and fees.

Your Signature	Date signed (mmm/dd/yyyy)
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