

B DESIGNATE BENEFICIARY For all provinces and territories except Quebec** (continued)

A. Designated Beneficiary

Last Name First Name
Address
Percentage Entitlement % Relationship to Account Holder Date of Birth SIN

B. Designated Beneficiary

Last Name First Name
Address
Percentage Entitlement % Relationship to Account Holder Date of Birth SIN

C. Designated Beneficiary

Last Name First Name
Address
Percentage Entitlement % Relationship to Account Holder Date of Birth SIN

TFSA Account Holder Signature _____ Date

C CONTINGENT BENEFICIARY(IES) For all provinces and territories except Quebec**

A contingent beneficiary(ies) will be entitled to receive the proceeds of the Plan upon my death if the designated beneficiary above has died before me. If I name more than one contingent beneficiary, then all the contingent beneficiaries (who are alive at my death) will share equally.

Contingent Beneficiary for A B C

Last Name First Name
Address
Relationship to Planholder Date of Birth SIN

Contingent Beneficiary for A B C

Last Name First Name
Address
Relationship to Planholder Date of Birth SIN

Contingent Beneficiary for A B C

Last Name First Name
Address
Relationship to Planholder Date of Birth SIN

TFSA Account Holder Signature _____ Date