

Dealer Code:
Representative Code:

PEAK Nominee Funds Transfer – Pre-authorized Debits (PAC)

Instructions: Change frequency or total composition Change investments and/or Change banking information	amount of investments, comp	olete sections 1, 2, 3, 4, 6		
1. ACCOUNT INFORMATION	N			
PEAK Account Number:				
2. CLIENT INFORMATION				
Client – First Name:	Last Name:			SIN:
Joint Client – First Name:	Last Name:			SIN:
3. CASH INSTRUCTIONS				
i) Action:	ange 🔲 Cancel			
ii) Total Dollar Amount: \$				
iii) Frequency:	☐ Bi-weekly ☐ Month	•	/ M M / D D	
4. SERVICE DETAILS				
Fund Code	Fund Name	Amount or allocation of total (%)	FE (PAD only)	End Date
		%		
		% %		
5. BANKING INFORMATION				
	lease attach a pre-printed	personal void cheque		
_	·		bank account until I direct otherwise. Signatures of all depositors are re	
6. SIGNATURE				
We understand and agree to all	the terms and conditions ann	nexed hereto and acknowle	edge receipt thereof.	
X Joint Client's signature				
XRepresentative signature		Date:		





Funds transfer - Pre-authorized Debits and Systematic Withdrawal Payments

(applicable for PEAK's self-directed plans only)

TERMS AND CONDITIONS

By signing this form, you hereby waive any pre-notification requirement as specified by sections 15(a) and (b) of the Canadian Payments Association Rule H1 with respect to PAD.

For the purpose of this authorization only, "you" and "your" means each and every account holder of an account.

You agree to participate in this PAD and/or SWP plans. For a PAD, you authorize PEAK Investments Services Inc. ("PEAK") and the financial institution ("FI") designated in the attached void personal cheque from the FI to deduct from your account at the FI, for: (i) the purchase of mutual funds as per your instructions designated on the previous page; and/or (ii) an annual payment from time to time (on or after the last business day in June of every year), for the payment of trustee or administration fees agreed under the terms and conditions of your registered account held at PEAK. You agree that the FI is not required to verify that any PAD has been drawn in accordance with this authorization, including the amount, frequency and fulfillment of purpose of any PAD.

For a SWP, you authorize PEAK to deposit the amounts listed in Section 3 (B) of the previous page to your account at the FI. This authority is to remain in effect until PEAK has received written notification from you of its change or cancellation. This notification must be received at least thirty (30) business days before the next debit is scheduled at your PEAK representative or the address provided below. You may cancel the PAD or SWP by using this authorization and checking off "Cancel" in Section 2 or 3 above (as applicable) or by obtaining a sample cancellation form at your FI or by visiting www.cdnpay.ca. Should this method of PAD be discontinued at a future date in writing by you, any trustee or administration fees owed to PEAK will automatically be deducted directly from your registered plan(s).

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your recourse rights, you may contact your FI or visit www.cdnpay.ca. Any dispute that you may have concerning a PAD or SWP may be addressed to PEAK. However, you may also dispute a PAD (a "Disputed Debit") by providing a signed declaration to your FI under the following conditions: i) an authorization was never provided to PEAK; ii) the PAD was not drawn in accordance with this authorization; iii) this authorization was cancelled; or iv) the PAD was posted to the wrong account due to invalid or incorrect information provided to or supplied by PEAK. You have up to ninety (90) calendar days from the date the Disputed Debit was posted to your account to report the problem to your FI and seek reimbursement. You will be asked to sign a written declaration stating why the PAD is being returned. You agree that, after this ninety (90) calendar day period, you shall resolve any dispute that you may have concerning a PAD solely with PEAK. You agree that delivery of this authorization to PEAK constitutes delivery by you to the FI.

You confirm that all persons whose signatures are required to authorize transactions on the FI account designated in the attached void personal cheque have signed this agreement.

You agree that the information in this form and any other personal information required, will be shared with the FI and the Mutual Fund entities, insofar as the disclosure of this information is directly related to and necessary for the proper application of the rules applicable for this PAD or SWP.

You acknowledge and agree that you are fully liable for any charges incurred by PEAK if the PAD cannot be made due to insufficient funds or any other reason for which you may be held accountable. If the PAD is rejected due to insufficient funds, PEAK may withdraw the additional charges (fees or penalties) from your PEAK account at any time. PEAK may also represent the PAD once for the same original amount, within thirty (30) days of the original debit attempt.

Applicable to the Province of Quebec only: it is the express wishes of the parties that this authorization and any related documents be drawn and executed in English. Les parties conviennent que la présente autorisation et tous les documents s'y rattachant soit rédigés et signés en anglais.

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