



**Transfer Authorization for Registered Investments (RRSP, LIF, LIRA, LRIF, TFSA, RRIF, Spousal RRSP/RRIF)**  
 Complete this form if you are transferring an existing RRSP, LIF, LIRA, LRIF, TFSA, RRIF, Spousal RRSP, Spousal RRIF from another financial institution to Global Growth Assets Inc. If you are opening a new TFSA, RRSP or RIF with Global Growth Assets Inc., please complete a TFSA, RRSP or RIF application along with this document.

**A. Client Information**

First Name \_\_\_\_\_ Initial \_\_\_\_\_ Last Name \_\_\_\_\_ SIN \_\_\_\_\_  
 Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 (dd/mm/yyyy)  
 City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_  
 ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
 Home PH Number \_\_\_\_\_ Business PH Number \_\_\_\_\_

**B. Receiving Institution - Transferee**

**Global Growth Assets Inc. c/o DataCore** Contact #: (416) 628-0263  
**70 University Avenue, Suite 350, Toronto ON M5J 2M4** Fax #: (416) 848-7782

Client Account: \_\_\_\_\_

**Dealer Information:**

Rep Name \_\_\_\_\_ Rep Number \_\_\_\_\_ ( ) \_\_\_\_\_  
 Rep PH Number \_\_\_\_\_

Dealer Name \_\_\_\_\_ Dealer Number \_\_\_\_\_ Dealer Acct Number (if applicable) \_\_\_\_\_

Registered Type:

- RRSP  LIF  LIRA  LRIF  TFSA  RRIF  Spousal RRSP  Spousal RRIF

Fund Name	Fund Code (FE)	FE Fee (if any)	Fund Code LL	Fund Code DSC	%/ \$ Amount

**C. Relinquishing Institution Information - Transferor**

Relinquishing Institution Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

I wish to transfer:  All in Cash  All As Is (In Kind)  All Assets but Mixed in Cash and As Is  Partial

Client Account Number: \_\_\_\_\_

**Investment Selection:**

	Investment Name	Symbol	Amount <input type="checkbox"/> \$ <input type="checkbox"/> %
<input type="checkbox"/> In Kind <input type="checkbox"/> In Cash			
<input type="checkbox"/> Shares/Units <input type="checkbox"/> Cash			
<input type="checkbox"/> In Kind <input type="checkbox"/> In Cash			
<input type="checkbox"/> Shares/Units <input type="checkbox"/> Cash			
<input type="checkbox"/> In Kind <input type="checkbox"/> In Cash			
<input type="checkbox"/> Shares/Units <input type="checkbox"/> Cash			

**D. Client Authorization**

I hereby request the transfer of my account and its investments as described above.

**\*WHERE I HAVE REQUESTED A TRANSFER IN CASH, I AUTHORIZE THE LIQUIDATION OF ALL OR PART OF MY INVESTMENTS AND AGREE TO PAY ANY APPLICABLE FEES, CHARGES OR ADJUSTMENTS.**

X \_\_\_\_\_

Signature of Account Holder \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

**E. For Use by Relinquishing Institution**

Registered Type:  RRSP  TFSA  LIRA  LRIF  RRIF  Spousal RRSP  Spousal RRIF  LIF:  Federal LIF  Old LIF  New LIF

We have transferred: \$ \_\_\_\_\_ as per the client instructions above

Authorized Person Name \_\_\_\_\_ Authorized Person Position \_\_\_\_\_ ( ) \_\_\_\_\_  
 Authorized Person PH Number \_\_\_\_\_

X \_\_\_\_\_

Authorized Person Signature \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

**F. For Use by Receiving Institution**

We agree to the above for a direct transfer of property in the amount of: \$ \_\_\_\_\_

We have received the property and will credit it to the Applicant under the Plan.

Authorized Person Name \_\_\_\_\_ Authorized Person Position \_\_\_\_\_ ( ) \_\_\_\_\_  
 Authorized Person PH Number \_\_\_\_\_

X \_\_\_\_\_

Authorized Person Signature \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_