

Altimum Beneficiary Designation Form

(to be accompanied by a signed letter of direction)

Client Name:

Account type:

Altimum Account Number:

Beneficiary #1 Information:

Title	Sex	Address
First Name		City
Last Name		Province
Relationship		Postal Code
SIN		Country
Birth Date		
Allocation	%	

Beneficiary #2 Information:

Title	Sex	Address
First Name		City
Last Name		Province
Relationship		Postal Code
SIN		Country
Birth Date		
Allocation	%	

Beneficiary #3 Information:

Title	Sex	Address
First Name		City
Last Name		Province
Relationship		Postal Code
SIN		Country
Birth Date		
Allocation	%	

Beneficiary #4 Information:

Title	Sex	Address
First Name		City
Last Name		Province
Relationship		Postal Code
SIN		Country
Birth Date		
Allocation	%	