



Pre-authorized Transaction Program

Beneva Guaranteed Investment Funds and Beneva GIAs

Beneva Inc., P.O. Box 10510, Station Sainte-Foy, Quebec QC G1V 0A3

Contract No.: _____

To modify or terminate a Pre-authorized Transaction Program already in effect, this form must be received at our office 10 calendar days prior to the modification or termination date.

Activating Modifying (if already in effect) Terminating

Effective date, modification date or termination date

1. Information about the Investor

Last name First name Date of birth

2. Pre-authorized Transaction Program

Mandatory: Attach a cheque specimen personalized to the investor's name marked "VOID". If the specimen is not personalized or personalized in a name other than the investor's name, complete Section 2F.

A Type of transaction (one choice only)	Subsection to complete	Not available for
<input type="checkbox"/> Pre-authorized Purchase Program (PPP)	B1, and D	LIRA, RIF, LIF, PRRIF, LRIF and RLIF
<input type="checkbox"/> Pre-authorized Transfer Program (PTP)	B2, D and E	N/A
<input type="checkbox"/> Pre-authorized Redemption Program (PRP) ¹	B3, C and E if RIF, LIF, PRRIF, LRIF or RLIF	LIRA

B Frequency	B1. Purchase (PPP)	B2. Transfer (PTP)	B3. Redemption (PRP) ¹
	<input type="checkbox"/> Weekly ² <input type="checkbox"/> Quarterly <input type="checkbox"/> Every two weeks ² <input type="checkbox"/> Semi-annually <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/> Every two months <input type="checkbox"/> One-time payment	<input type="checkbox"/> Weekly ² <input type="checkbox"/> Quarterly <input type="checkbox"/> Every two weeks ² <input type="checkbox"/> Semi-annually <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/> Every two months <input type="checkbox"/> One-time payment	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually <input type="checkbox"/> One-time payment
Date of first debit or first redemption ³ :	Periodic: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	One-time: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Periodic or one-time: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Periodic or one-time: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

1. For the PRP, select a date between the 1st and the 27th of the month.
 2. For these frequencies, please select a business day.
 3. If no selection is made, in the case of RIF, LIF, PRRIF or LRIF the date will be the first business day of December of the year following receipt of the form. Otherwise, the date will be the first business day of the month following receipt of the form, except for the "One-time payment" frequency. In this case, the payment will be made on the same day.

C RIF, LIF, PRRIF or LRIF payments (select one only)

Minimum (Apply only in the year following the establishment of the plan) Fixed: \$ _____ Gross or Net

Maximum (LIF or LRIF only) Other: _____

D Purchase (PPP) or Transfer "to" (PTP) (Laddered GIA is not available except for one-time payment).

Total amount: \$ _____

Beneva GIF – Minimum \$40/contribution	
Fund code ⁴ Mandatory	(\$ or %)

4. The first digit of the fund code indicates the guarantee selected; the second represents the sales option and the three last ones correspond to the fund number. In the absence of choice for the first two digits, the basic guarantee and no-load option will be selected.

Reserved for Beneva

 Contract No.

Investment
 Client Services • Tel.: 1 877 841-8822
 beneva.ca

The form sent to Beneva constitutes the original document.

2. Pre-authorized Transaction Program (Cont'd)

D Purchase (PPP) or Transfer "to" (PTP) (Laddered GIA is not available except for one-time payment) (Cont'd)

High-Yield Account – \$400 minimum

Amount of: \$ _____

Beneva Guaranteed Investment – \$400 minimum per GIA

Investment name or No.	Redeemable (R) ² or Non redeemable (NR)	Term	Simple interest ³ (S) or Compound interest (C)	(\$ or %)

E Redemption (PRP) or Transfer "from" (PTP)

Total amount: \$ _____

Beneva GIF – Minimum \$100/redemption				
Fund code ¹ (mandatory)				
(\$ or %)*				

Beneva Guaranteed Investment – Minimum \$100/redemption		
GIA No.	(\$ or %)*	GIA maturity date
		Y Y Y Y M M D D
		Y Y Y Y M M D D
		Y Y Y Y M M D D
		Y Y Y Y M M D D

High-Yield Account

Amount of: \$ _____

* For a RIF/LIF/PRRIF/LRIF income payment, the allocation must be in %.

- The first digit of the fund code indicates the guarantee selected; the second represents the sales option and the three last ones correspond to the fund number. In the absence of choice for the first two digits, the basic guarantee and no-load option will be selected.
- Redeemable investment subject to the applicable fees and penalties.
- Annual payment – Direct Deposit (attach a cheque specimen).

F Banking Information

Mandatory: if the cheque specimen is not personalized or personalized in a name other than the investor's name

Last name, first name of bank accountholder

Branch number	Institution number	Account number																					

Last name, first name of joint bank accountholder (if applicable)

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3. Authorization and Rights to Reimbursement

The signature of the bank accountholder and the joint bank accountholder are required, where applicable.

- I authorize Beneva Inc. (Beneva) to debit my account according to my instructions, for pre-authorized and/or occasional or sporadic amounts or those specified in Section 2D and/or to deposit the fixed or variable amount based on the options selected in Sections 2C/2E, at the frequency selected in Section 2B.
- I authorize Beneva Inc. (Beneva) to change the amount to be debited from my account and/or to be deposited in my account at my request.
- I authorize Beneva Inc. (Beneva) to invoice me and debit any charges from my account if the pre-authorized debit payment cannot be processed as stipulated in this agreement.
- I authorize Beneva Inc. (Beneva) to withdraw from my bank account all benefits that may have been paid by mistake or to which I am not entitled under the contract or under the associated laws and regulations in effect.
- I authorize the financial institution debit to my account and/or to deposit into my account the previously specified amount. This authorization may be revoked at any time upon my written notice. This notice must be sent to Beneva 10 calendar days prior to the next scheduled debit payment and/or deposit.
- I acknowledge receipt of a copy of this agreement and waive my right to receive any further notices in writing before the first pre-authorized debit payment and/or deposit, when a change is made at my request to the pre-authorized debit payment and/or deposit, when charges must be debited and when any change is made to the pre-authorized debit payment and/or deposit specified in Section 2.

Rights to Reimbursement

I have certain rights to recourse should a debit not comply with this agreement. For example, I am entitled to receive a reimbursement of all unauthorized debit payments or those that are not in compliance with this authorization. For more information about my rights to reimbursement, on how to obtain a sample cancellation form or any other information on my right to cancel a pre-authorized payment agreement, I may contact my financial institution or visit the CPA's Web site at www.cdnpay.ca.

By signing, I acknowledge having read and accepted the Authorization and the Rights to Reimbursement.

X

Bank accountholder's signature¹

Y | Y | Y | Y | M | M | D | D
Date

1. If the bank accountholder is not the investor, please complete section 2F. For NRSP, please fill out form FRA1869.

4. Agreement and Signatures

Advisor's Declaration (signature of advisor is mandatory)

- I certify that my signature, if affixed electronically, has the same legal value as my handwritten signature. Any reproduction of this form whose integrity is ensured has the same legal value as the original.
- I certify that the investor's signature was affixed by the investor.

Investor's Declaration (signature of investor is mandatory)

- I authorize Beneva to proceed with a Pre-authorized Transaction Program in accordance with the instructions provided in this form.
- If it is a PRP or a PTP, I acknowledge that my advisor explained the Back-load Sales Charges option to me and that I understand that redemption fees will apply if such redemptions occurs within six years of the purchase date.
- I authorize Beneva, when required by law, to ascertain my identity by means of a reliable and independent identification product and/or any other method provided for by law.
- I certify that my signature, if affixed electronically, has the same legal value as my handwritten signature. Any reproduction of this form whose integrity is ensured has the same legal value as the original.

X

Investor's signature (mandatory)

Y | Y | Y | Y | M | M | D | D
Date

X

Co-investor's signature (if applicable)

Y | Y | Y | Y | M | M | D | D
Date

X

Irrevocable beneficiary's signature (if redemption) (mandatory)

Y | Y | Y | Y | M | M | D | D
Date

X

Advisor's signature

Y | Y | Y | Y | M | M | D | D
Date

Protecting your personal information is a priority for Beneva. To find out more about our practices, please consult the *Personal Information Protection Statement* located at www.beneva.ca.

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