



Sleep well.

# TRANSFER AUTHORIZATION FOR NON-REGISTERED INVESTMENTS

The data entered on this form may be scanned and stored electronically. Please print neatly in the spaces provided to ensure completeness, accuracy, and machine readability.

## 1. Applicant Information

Last Name		First Name		Initials	
Address		City		Province	Postal Code
Home Phone	Business Phone	Social Insurance Number		Date of Birth	
( )	( )	M A N D A T O R Y		M A N D A T O R Y	
				D D M M Y Y	

## 2. Receiving Institution Information

Stone Investment Group Limited c/o CIBC Mellon GSSC, 1 York St. Suite 900, Toronto ON M5J 0B6 Tel: 800 795 1142 Fax: 855 884 0493

Stone Account Number		Dealer Account Number		Dealer Name	
Dealer Code	Rep Code	Rep Last Name		Rep First Name	
Rep Telephone Number		Rep Fax Number		Rep E-mail Address	
( )		( )			

FUND CODE	FUND NAME	AMOUNT (\$ OR %)	SALES CHARGE (%)
SCL			
SCL			
SCL			
SCL			
SCL			
SCL			
SCL			

## 3. Applicant Direction to Relinquishing Institution

Relinquishing Institution Name		Client Account/Policy Number	
Relinquishing Institution Address		City	Province
			Postal Code

TRANSFER (Check One):

All In Cash\*       All as is (In Kind)       All Assets\*, mixed In Cash and In Kind per list below or attached       Partial\*, per list below or attached

*Please refer to statement in bold in Applicant Authorization in section 4 below.	Amount	Symbol/Cert./Policy No.	Investment Description	Delay Until
<input type="checkbox"/> In Cash <input type="checkbox"/> In Kind <input type="checkbox"/> Share/Units <input type="checkbox"/> Dollars				DD MM YY
<input type="checkbox"/> In Cash <input type="checkbox"/> In Kind <input type="checkbox"/> Share/Units <input type="checkbox"/> Dollars				DD MM YY

## 4. Applicant 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.**

Signature of Account Holder with Signature Guarantee Stamp

Date

DD MM YY