



# REGISTERED EDUCATION SAVINGS PLAN (RESP) TRANSFER FORM

## Annex 1: Additional beneficiaries

- Each promoter is to complete their respective copy of Annex 1 and provide their respective information.
- Attach additional copies of this annex as required.

### 1 Information about the promoter

Promoter's name	
Contract number	Completed by: <input type="radio"/> Receiving promoter <input type="radio"/> Relinquishing promoter

### 2 Information about the beneficiaries

Beneficiary	Beneficiary	Beneficiary	Beneficiary
Family name			
Given name			
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Another gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Another gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Another gender
Social Insurance Number (999 999 999)			
Date of birth (yyyy/mm/dd)			
Canada Learning Bond (CLB) amount	\$	\$	\$
Lifetime contributions	\$	\$	\$

#### Optional: Additional information about the beneficiaries (to be provided if available)

OPTIONAL	Beneficiary	Beneficiary	Beneficiary	Beneficiary
	Named to receiving RESP	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
	Assisted contributions	\$	\$	\$
	Unassisted contributions	\$	\$	\$
	Year-to-date contributions	\$	\$	\$
	Basic CESG	\$	\$	\$
	Additional CESG	\$	\$	\$
	BCTESG	\$	\$	\$
	CESG paid out in EAPs	\$	\$	\$
	CESG repaid	\$	\$	\$
PSE/Contribution withdrawal	\$	\$	\$	
Pending incentives (specify)				

Send to relinquishing or receiving promoter with Part B or C (as applicable)

Ce formulaire est disponible en français