

REGISTERED EDUCATION SAVINGS PLAN (RESP) TRANSFER FORM Part C: Relinquishing promoter

| 1 Info | ormation | about the reli | inquishir | ng promoter | | | |
|--|---------------|------------------------|------------------------------------|-----------------------|---------------------------------|---------------|--|
| Promoter's name | | | | | | | |
| Address | | | | | | | |
| City | | Province/Territory | | Postal cod | tal code | | |
| Contact name | Telephone | | e number (999) 999-9999 | | | | |
| 2 Info | ormation | about the reli | inquishir | ng RESP | | | |
| | | ract number RESP typ | | RESP type \(\) Inc | e 🔘 Individual 🔘 Family 🔘 Group | | |
| Date contract opened (yyyy/mm/dd) | | | Transfer request date (yyyy/mm/dd) | | | | |
| Subscriber's family name or Agency name | | | Subscriber's given name | | | | |
| Joint subscriber's family name (if applicable) | | | Joint subscriber's given name | | | | |
| 3 Info | ormation | about the bei | neficiarie | es | | | |
| Beneficiary | Ве | eneficiary 1 | Ber | neficiary 2 | В | Beneficiary 3 | |
| Family name | | | | | | | |
| Given name | | | | | | | |
| Gender | ○Male ○ | Female Another gender | ○Male ○ | Female Another gender | ○Male (| Female Anot | |
| Social Insurance Number (999 999 999) | | · | | | | | |
| Date of birth (yyyy/mm/dd) | | | | | | | |
| CLB amount | \$ | | \$ | | \$ | | |
| Lifetime contributions | \$ | | \$ | | \$ | | |
| Insert a checkmark if there | are additiona | al beneficiaries (comp | lete Annex 1) | Total nur | nber of ben | neficiaries | |



| | Optional: Additional information about the beneficiaries (to be provided if available) | | | | | | | |
|----------|---|----|---------------|------------------------|---------------|-------------------------|-------|------|
| OPTIONAL | Beneficiary | | Beneficiary 1 | Beneficiary | Beneficiary 3 | | | |
| | Named to receiving RESP | 0 | YES ONO | ○YES ○ | NO | O \ | res 🔾 | 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) | | | | | | | |
| 4 | 4 Transfer eligibility information | | | | | | | |
| a. I | a. Has an Accumulated Income Payment (AIP) been made from this RESP? | | | | | | | |
| 1 | Note: If an AIP has been made from the relinquishing RESP, the transfer is not permitted under the <i>Income Tax Act</i> . | | | | | | | |
| b. I | b. Has this RESP ever received an additional amount of Canada Education Savings Grant (Additional CESG)? | | | | | | ○ NO | |
| с. [| c. Does this transfer include the Canada Learning Bond (CLB)? | | | | | | ○ YES | ○ NO |
| d. I | d. Does this transfer include the British Columbia Training and Education Savings Grant (BCTESG)? | | | | | | ○ NO | |
| | Note: If the receiving RESP does not offer one or more of the incentives held in the relinquishing RESP see section 8: Pre-transfer repayment policy in transfer form Part A. | | | | | | | |
| 5 | 5 Notional account balances and market value transferred | | | | | | | |
| To | Total market value of assets transferred: \$ Type of transfer: Full transfer or Partial transfer | | | | | sfer | | |
| | Unassisted contributions | | | Assisted contributions | | Accumulated income/loss | | |
| \$ | | | 1998 & after | \$ | | \$ | | |
| | CESG | | | | | BCTESG | | |
| \$ | \$ \$ | | | \$ | | | | |



| 6 Information about pending application(s) | | | | | | | | |
|--|--|-----------------------|--------------------------|---------------------------|------|--|--|--|
| Is there a pending application for the CESG, C | ○ YES | ○ NO | | | | | | |
| How to complete the transfer form for pending grants and/or bond | | | | | | | | |
| When performing the initial transfer, the relinquishing promoter must complete section 6 of this form (without completing the section titled Notional transfer amount of pending grant(s)/bond) and send the completed form to the receiving promoter. | | | | | | | | |
| 2. When performing the subsequent transfers, the relinquishing promoter must complete sections 6 and 8 of Part C of a new transfer form and send it to the receiving promoter with: | | | | | | | | |
| a) a copy of page 1 of Part C of the initial transfer form; or | | | | | | | | |
| b) a fully completed page 1 of Part C of the new transfer form. | | | | | | | | |
| Initial transfer request date (yyyy/mm/dd) | Current date (yyyy/mm | n/dd) | Initials (promoter repre | (promoter representative) | | | | |
| Notional transfer amount of pending grant(s)/bond | | | | | | | | |
| Total amount transferre | Assisted contributions | | | | | | | |
| \$ | | \$ | | | | | | |
| | Indicate the dollar amount of unassisted contributions in the original transfer that should now be considered as assisted contributions in the receiving RESP. | | | | | | | |
| CESG | CI | LB | BCTESG | | | | | |
| \$ | \$ | | \$ | | | | | |
| Have all pending applications been successfully processed and all pending grant(s)/bond received been transferred? | | | | | ○ NO | | | |
| 7 Privacy | | | | | | | | |
| The information provided in this form will be shared with the receiving promoter for the purposes of processing the transfer. | | | | | | | | |
| Personal information will be handled in accordance with the privacy legislation in the respective jurisdictions. The transfer is also subject to <i>The Personal Information Protection and Electronic Documents Act</i> (PIPEDA). PIPEDA provides every person with a right of access to information under the control of the receiving promoter and/or the relinquishing promoter, subject to a limited set of exemptions. | | | | | | | | |
| 8 Certification | | | | | | | | |
| I certify that to the best of my knowledge, the information given on this form and the attached Annex 1 - Additional beneficiaries (if applicable) is accurate and complete. | | | | | | | | |
| Name of authorized RESP promoter represent | ative Telephone | number (999) 999-9999 | Fax number (999 | ımber (999) 999-9999 | | | | |
| Signature of authorized RESP promoter representative Date | | | | | 'dd) | | | |
| Where to get more information about the Canada Education Savings Program: | | | | | | | | |
| Phone: 1 888 276-3624 / 1 866 260-7723 for TTY users only E-mail: cesp-pcee@hrsdc-rhdcc.gc.ca | | | | | | | | |



Internet: www.canada.ca/RESPresources