GUIDELINES FOR COMPLETING THE FORM

Transfer Form TRF 533 is used to request the following transactions on Canada Savings Bonds, Canada Premium Bonds, Canada Payroll Savings Plans and/or Government of Canada Marketable Bonds:

Add co-owner(s) and survivor to any bond series.

Add survivor to jointly held series for any bond series.

To transfer bonds held "in trust", into the registered owners name alone. In this instance, the signature of the trustee is required in Section F of this form.

Change ownership of any bond series due to separation or divorce. In this instance, please include one of the following legal documents:

-Divorce Order (refer to table below to determine if certification or notarization is required).

or

-Written Separation Agreement - signed by both parties (refer to table below to determine if certification or notarization is required).

CERTIFICATION OR NOTARIZATION OF LEGAL DOCUMENTS

The following table outlines the certification or notarization requirements for legal documents required to process this transaction.

<u> </u>	·	U	•
Estate par value	\$1000.00 or less	\$1000.01 - \$3500.00	Greater than \$3500.00
•	documents	idocuments of court certified	Original notarized documents or court certified documents
RAMILIFAMENT FOR TORMS	Signed (notarization not required)	Signed and notarized	Signed and notarized

INSTRUCTIONS

The form must be completed in full in order to be processed. This includes the signatures of all bond owners or their legal representative and the account and/or plan number(s) impacted by the request.

Note: For your protection, incomplete forms or forms with incorrect information will be rejected.

If the transaction involves physical certificate bonds, the unsigned physical certificates in question must be sent along with the completed form. Matured bonds will be redeemed automatically. Unmatured bonds may be redeemed or transferred, but transferred bonds will not be accompanied by a new physical certificate. New registered owners will receive a letter confirming ownership and including all bond details. The confirmation letter will be sent to the address indicated on the form.

If there has been a legal name change, the Legal Name Change Form (LNC) must be completed and submitted with this form.

Co-owners and the words "and Survivor" may be added to the registration of bond(s)/plan(s); however, the individual must be a resident of Canada. You may add more than one co-owner to certificated bonds. By adding a co-owner(s) to any bond (s)/plan(s), you need to be aware that this name cannot be removed once the transaction has been processed, except in the case of a separation or divorce or upon death of one of the owners.

By adding "and Survivor" to your bond(s)/plan(s), you understand that your portion of the bond(s)/plan(s) will go to the other co-owner(s) in the event of death, except for residents of the Province of Quebec.

Where a deceased co-owner is a resident of Quebec, the words "**and Survivor**" will not be legally recognized. Therefore, the proceeds from bond(s)/plan(s) registered to a deceased Quebec resident will be distributed according to the deceased's Will, regardless of whether the "**and Survivor**" designation appears on the registration.

Please note that Government of Canada Retail Debt Instruments are also referred to as bonds, plans and securities.



WHO CAN COMPLETE THIS FORM?

The registered bond owners can complete this form.

In the case where the registered owner is a minor, we require the signature of BOTH parents under Section F of the form.

<u>Note:</u> If a <u>legal guardian</u> or only <u>one parent</u> are legally acting on behalf of the minor, we require one of the following supporting documents which must contain a "*custody clause*" to identify who can legally represent the minor:

-Divorce Order (refer to table above to determine if certification or notarization is required).

or

-Written Separation Agreement - signed by both parties (refer to table above to determine if certification or notarization is required).

or

-Custody Agreement (refer to table above to determine if certification or notarization is required).

A Power of Attorney acting on behalf of the registered owner can complete this form. Legal documents must be provided (refer to table above to determine if certification or notarization is required).

EXAMPLES OF ACCEPTABLE REQUESTS

REQUEST	NAME(S) CURRENTLY APPEARING ON THE BOND(S)/PLAN(S)	NEW NAME(S) TO APPEAR ON THE BOND(S)/PLAN(S)	APPLICABLE FOR WHICH BOND SERIES
Adding a co-owner and the rights of survivorship	John Doe	John Doe and Jane Doe and Survivor	Applicable to any bond series
Adding the rights of survivorship to a jointly held bond(s)/plan(s)	I John I Joe and Jane I Joe	John Doe and Jane Doe and Survivor	Applicable to any bond series

SPECIFIC INSTRUCTIONS

Please print clearly or type the required information into the form fields.

Please be sure to complete all required Sections to avoid delays in processing your request.

Sign page 3 (of the form) and mail your request to the destination indicated on page 3 (of the form).

If space is insufficient, please complete and attach a separate sheet that includes all the required fields, in the same order they appear. Please initial all attached sheets.

INSTRUCTIONS SPECIFIC TO FILLING OUT SECTIONS B, D AND F OF THE FORM

SECTION B - ACCOUNT NUMBERS

Examples of a Payroll Savings Plan Number:

- -10 digit number that begins with a "2", e.x.: 2123456789.
- -Can be found on a copy of your statement, your T5 slip or online at CSB Online Services: mybonds.gc.ca.

Examples of an account or serial number for certificated Canada Savings Bonds, Canada Premium Bonds or Government of Canada Marketable Bonds are:

Account Number:

-10 digit number, e.x.: 1234567890.

-Can be found on your T5 slip.

Serial Number:

-Located in the top of the bond.

e.x.: CS123F1234567M or CP15F7654321L or H85M023416.

SECTION D - REDEMPTION/TRANSFER INSTRUCTIONS

Note: Only unmatured bonds may be transferred. All matured bonds will be redeemed automatically.

Enter the names of all registered owners or their legal representatives.

In the **"redemption/transfer"** section, enter all the names of registered owners and the bond(s)/plan(s) information specific to this transaction. Provide the new co-owner's or owner's personal information, including their Social Insurance Number (required by the Income Tax Act).

<u>Note</u>: If bond(s)/plan(s) quoted in Section B are to be "redeemed/transferred" to more than one registration, please complete an attachment that includes the information seen in Section D for each registration. Please initial all attachments.

SECTION F - FINAL DECLARATION

All the **current** bond owners and co-owners or their legal representative(s) must sign the form.

If the value of the transaction exceeds \$1000.00, their signatures must be either:

-guaranteed by a Canadian Financial Institution acceptable to the Bank of Canada or a member of the Medallion Program.

OR

-witnessed by a Commissioner for Oaths, properly identified with their stamp and signature present.

OR

-witnessed by a Notary Public, properly identified with their Notary seal/stamp and signature present.



ECTION A - CURRENT ACCOUNT DETAILS ote: If you are unsure of the current address we have on file, please provide all y	non revious addresses on a senarate sheet. Please initial all attached sheet
<u>te</u> . If you are unsure of the current address we have offline, please provide all y	your previous addresses on a separate sneet. Flease lilitar all attached sneets
REGISTRATION - currently appearing on the bonds/plans	
CLOISTRATION - <u>currently appearing on the bolids/plans</u>	
Social Insurance Number (required by the Income Tax Act)	
Care of	(if applicable
Address	(include Apt. No., R.R. or P.O. Box
City	Province Postal Code
Country Telephone (primary)	Telephone (other)
CTION D. ACCOUNT NUMBERS	
CTION B - ACCOUNT NUMBERS fer to page 2 of the guidelines.	
to page 2 of the galdelines.	
Payroll Savings Plan Number	
── Canada Savings Bonds, Canada Premium	Par value \$
Bonds or Government of Canada Marketable Bonds <u>Account Number(s)</u>	r ai value \$
Note: If space is insufficient, please complete and attach	Par value \$
a separate sheet that include all the required fields, in the same order they appear. Please initial all attached sheets.	Par value \$
or - the Bond Serial Number(s)	
Par value \$	Par value \$
Par value \$	Par value \$
Par value \$	Par value \$
Par value \$	Par value \$
☐ I have attached the unsigned bond certificate(s) to this	s request.
ECTION C - LEGAL DOCUMENTATION DETAILS te: Only original documents will be returned unless specified otherwise.	
ease acknowledge the following:	
I have attached the required legal document(s) as per the	e quidelines
That attached the required legal document(s) as per the	gaidoinios.

ECTION D. DE	DEMOTION/TO A NOTED INCTIONS
otes:	DEMPTION/TRANSFER INSTRUCTIONS
All matured bonds wil	Il be redeemed automatically.
	can be done by direct deposit <u>or</u> if the bond series being transferred is related to "regular interest bonds", the owner has the option to terest be deposited directly into their bank account, <u>by completing Section E - Direct Deposit Set Up, on page 3</u> .
	confirming ownership will be sent to the address provided below under "** <u>Mailing Address</u> **".
Know all men by	these presents that I/we:
·	Name of the bond owner(s) of authorized representative(s)
	d, do hereby request that the securities listed here:
Bond	Par
Series	value \$
pe REDEEMED/	TRANSFERRED in favour of the following:
REDEEM: S	Select this box if you are requesting to redeem <u>Canada Savings Bonds</u> (Series 32 and up), Canada
	Premium Bonds, old style CSBs (Series 1-31) and/or Government of Canada Marketable Bonds.
,	All matured bonds will be automatically redeemed. By selecting this box, payment is to be issued as follows:
PAYABL	E TO:
.,,,,,,,	- · · · · <u> </u>
SINGLE REGI	
owner:	
JOINT REGIS	TRATION *Check
	(1) this
Names of new	hox to add
registered owr	lers:
	(2) "and Survivor"
	Option Only of Quebec, the term "and Survivor" does not apply under the current law. with CSB S114 and CPB P64 will automatically be registered "Joint and Survivor".
Preferred langu	lage C French Date of birth Social Insurance Number (nequired by the Income Tax Act)
MAILING ADI	DRESS
Care of	(if applicable)
Address	(include Apt. No., R.R. or P.O. Box)
City	Province Postal Code
Country	Telephone (primary) Telephone (other)

	ach a "PERSONALIZED VOID CHEQUE"	to this form*.
Note: The Bank Account (cheque) must be in the names of Al	LL bond owner(s).	
If you do not have a personalized void cheque, fields 1-3 institution MUST affix their branch stamp in field 5 once		. 5
Name of the Registered Bank Account Holder(s)		
2 Branch Number 3 Institution Number 4	Account Number	Branch stamp here
SECTION F - FINAL DECLARATION		
I (We) give all right, title and interest in the section.	urities described above absolutely and the	Bank of Canada is hereby authorized
to make such entries in the books of registration a		
• In the case of jointly owned bonds, the register		
registration.		
Declared before me at	on /	
	City Date	: dd/mmm/yyyy
If the par value of transaction exceeds \$1000.00: Canadian Financial Institution: Signature Guaranteed	I am the registered owner of the bond(s)/plan(s).	I am the registered owner of the bond(s)/plan(s).
stamp, Endorsement Guaranteed stamp or Medallion Guaranteed stamp and authorized signature required.	I am the legal guardian/parent of the minor bond owner.	I am the legal guardian/parent of the minor bond owner.
Commissioner for Oaths: Stamp and signature required (not to be used for par values exceeding \$20,000).	behalf of the bond owner.	I am a legal representative acting on behalf of the bond owner.
Notary Public/Lawyer: Notarial stamp/seal and signature required.	e	
I swear that I have witnessed and guarantee that the person	n	
signing on the right, as the registered owner(s) or as the legal representative(s) for the registered owner, is/are	Signature	Signature
whom they say they are.	Note:	
Place	Any alterations must be initialed by the	
stamp /	representative(s) for the registered ow	ner before the declaration is signed.
seal and		
sign here	_	
Signature		

MAIL to:	P.O. Box 2770, Station D • Ottawa, Ontario K1P 1J7	-for Certificate Bonds and for Bonds purchased through the Payroll Savings Program.	
COURIER delivery:	2500 Solandt Rd • Suite 100 • Kanata, Ontario K2K 3G5		
f you require furthe	er information, please contact Customer Servic	e, Monday to Friday, 9 a.m. to 5 p.m. (ET) at:	
 for Bonds purchased to 	hrough the Payroll Savings Program		1 877 899-3599
 for certificated Canada 	Savings Bonds (series 32 and up) and Canada Premium Bond	ds	1 800 575-5151
 by TTY(teletypewriter) 			1 800 354-2222
for Canada Savings Bo	onds (series 1 - 31) or Government of Canada Marketable Bond il and Wholesale Debt Administration, 234 Wellington, 2 West, i	ds (Monday to Friday, 8 a.m. to 4 p.m. (ET)	1 800 665-8650

Signature

The personal information provided on this form is protected under the provisions of the PRIVACY ACT and will be used solely for the purpose for which it was collected.

