

TRADEX MANAGEMENT INC.

CHANGE OF BENEFICIARY

PLEASE PRINT

RRSP/RRIF/TFSA

ACCOUNT NO.: FULL

GIVEN NAME: LAST

NAME:

ADDRESS:

SIN:

I hereby revoke any previous designation of beneficiary made by me under the provisions of the above-captioned Retirement Plan, and pursuant to the provisions of the said Plan I hereby designate as my beneficiary and the person entitled to receive my interest in the said Plan on my death,

NAME:

MY RELATIONSHIP:
(spouse, child etc.)

ADDRESS:

SIN:

DATE OF BIRTH: _____

if living at my death, otherwise my estate, reserving the right to revoke this designation.

SIGNATURE OF PLANHOLDER: _____

DATE:

SIGNATURE GUARANTEE: _____