GUIDELINES FOR COMPLETING THE FORM

IMPORTANT INFORMATION

If you have a Single Plan in the Payroll Savings Program, you can also change your address, enroll in Direct Deposit or change your existing banking information online by logging on to CSB Online Services at: <u>mybonds.gc.ca</u>

The form must be completed in full in order to be processed. This includes the signatures of all bond owners and the registration account / plan number(s) that require the change. *For your protection, incomplete forms or forms with incorrect information will be rejected.

Only the account information you provide will be updated.

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

For regular-interest bond owners, please be aware that in order to receive your annual interest payment in time, we must receive your new address or direct deposit information at least two months prior to the interest payment date.

WHO CAN COMPLETE THIS FORM?

The bond owner(s) can complete this form.

The legal guardian(s)/parent(s) acting on behalf of the minor bond owner can complete this form.

A legal representative acting on behalf of the bond owner providing the following legal documentation (see note):

Power of Attorney

Last Will and Testament, the Death Certificate or Letters Probate /Administration.

Note: All documents must be certified by one of the following:

-a Canadian Financial Institution

-a Commissioner for Oaths

-a Notary Public properly identified with stamp/seal and signature present.

*Requests containing legal documents must be mailed **not** faxed.

INSTRUCTIONS SPECIFIC TO FILLING OUT SECTIONS A,C AND E OF THE FORM

SECTION A - Account Numbers

Examples of a Payroll Savings Plan Number: -10 digit number that begins with a "2" *ex:* **2**123456789. -can be found on a copy of your statement, your T5 Slip or **online at CSB Online Services**: <u>mybonds.gc.ca</u>.

Examples of an account or serial number for Canada Savings Bond/Premium Bond are:

Account Number: -10 digit number *ex: 1234567890.* -can be found on a copy of your statement or your T5 slip. <u>Serial Number</u>: -located in the top center of the bond

ex: CS123F1234567M or CP15F7654321L

Examples of a Canada RSP/RIF Plan Number: -can be up to 11 digits long *ex: 01234567890.* -**The Canada RSP** number can be found on your semi-annual statement. -**The Canada RIF** number can be found on your quarterly statement.

SECTION C - CURRENT or NEW address

-for Non Residents

If you have a non-Canadian address, please contact the Canada Revenue Agency in order to determine your individual residency status.

SECTION E - Direct Deposit Change/Set up and/or Redemption

If you are not providing a personalized VOID cheque for your direct deposit details, all 5 fields in Section E of the form must be filled out. When the financial institution places their branch stamp, they are validating that the details entered in these fields are true and accurate.

If you are attaching a personalized VOID cheque, it must have the following characteristics:

Example: PERSONALIZED VOID CHEQUE

The new banking information must be in the names of all the bond owners.	FIRSTNAME LASTNAME Date 123 STREETNAME CITY, PROVINCE, A1B 2C3 Date TEL: (12) 456-7890
All bond owners' names must be pre-imprinted by the financial institution on the top left hand corner of the cheque.	PAY TO THE ORDER OF
For the Canada Payroll Savings Program, this account information will replace any previous payment instructions on the plan(s) provided on the form.	BRANCH NUMBER FINANCIAL INSTITUTION NUMBER ACCOUNT NUMBER

CANADA	COADD-08-13 Change of Address and Direct
SAVINGS	Deposit Form
BONDS	Protected B (when completed)
SELECT TYPE OF REQUEST Change of Address.	
Direct Deposit change or set up.	A, B, C, D & F A, B, C, E & F
Note: If space is insufficient, please attach a separate page that includes the fields requested a	nd initial all attached pages.
SECTION A - Select all account numbers that require updating Refer to page 2 of the guidelines.	
Payroll Savings Plan Number	
Date of Birth: dd/mmm/yyyy / Contribution Amount \$	per pay
Canada Savings Bond or Canada Premium Bond Account Number	
or - the Bond Serial Number(s)	
The Canada RSP/RIF Plan Number	
Date of Birth: dd/mmm/yyyy / /	
and - If the RSP contributions are being purchased	
through the Payroll Savings Program, also provide the:	per pay
SECTION B - Enter name(s) of ALL registered owner(s)	
Surname	
Given Name	Initial(s)
Co-owner (if applicable):	
Surname	
Given Name	Initial(s)
SECTION C - Enter CURRENT/NEW address	
Care of	(if applicable)
	de Apt. No., R.R. or P.O. Box)
	Postal Code
Telephone (primary) - - - -	
Country If your NEW address is <u>outside of Canada</u> , please select one of the following option I am a Canadian resident for tax purposes.	ons:
 I am not a Canadian resident for tax purposes since (dd/mmm/yyyy): 	
SECTION D - Enter OLD address (for a change in address only)	
<u>Note</u> : If you are unsure of the old address we have on file, please provide all your previous addresses on a separate sheet. F	Please initial all attached sheets.
Care of	(if applicable)
	de Apt. No., R.R. or P.O. Box)
	Postal Code
Country Telephone (primary) - Telephone (other)	
<u>NOTE:</u> PLEASE REMEMBER TO COMPLETE SECTION F - THE SIGNATURE OF ALL REGISTE	RED OWNERS.

SECTION E - Direct Deposit Change/Set up and/or Redemption

Attach a "PERSONALIZED VOID CHEQUE" to this form. Note: The Bank Account (cheque) must be in the names of ALL bond owner(s).

If you do not have a personalized void cheque, fields 1-5 below, MUST all be filled out. The financial institution MUST affix their branch stamp in field 5 once they have completed the verification of fields 1-4.

1 Name(s) of account holder(s)		
2 ^{Branch} Number	3 ^{Institution} 4 ^{Account} Number	5 Branch stamp here

<u>Note For Payroll Savings Plan Owners</u>: When co-owners sign this form, they both authorize the Bank of Canada to make redemptions at the request or either co-owner, to process the redemption of the above plan and deposit the proceeds in the account specified above or on the attached voided cheque provided. The authorizations will remain in effect until the Bank of Canada receives written notice signed by either or both co-owners terminating these authorizations.

An immediate redemption request is optional and only allowed on this form for first time direct deposit set up or any changes to banking information.

Amount \$

redeem this amount from the Payroll Savings Plan noted in Section A.
 redeem this amount from the Canada RSP/RIF Plan noted in Section A.
 <u>Note</u>: RSP/RIF redemptions are subject to withholding tax

-If space is insufficient (more t	han two bond owners), the other co-owne		
I am the registered owner	of the bond(s)/plan(s).	○ I am the registered owner	of the bond(s)/plan(s).
◯ I am the legal guardian/par	rent of the minor bond owner.	◯ I am the legal guardian/pa	rent of the minor bond owner.
l am a legal representative owner.	acting on behalf of the bond	C I am a legal representative owner.	e acting on behalf of the bond
	//		//
Signature	Date: dd/mmm/yyyy	Signature	Date: dd/mmm/yyyy

FAX to:	for Bonds purchased through the Payroll Savings Program		613 782-7750	
	AX to: for Certificated Bonds and The Canada RSP/RIF		613 782-8096	
<u>Note</u> : If legal do	cumentation is required the request must be mailed <u>r</u>	n <u>ot</u> faxed.		
Caution: Please	protect your personal information by verifying that th	e <u>correct</u> fax number has been dialed prior to transmitting you	r fax.	
P.O. Box 2770, Station D • Ottawa, Ontario K1P 1J7		for Certificate Bonds and for Bonds purchased through the Payroll Savings Program		
MAIL to:	P.O. Box 2390, Station D • Ottawa, Ontario K1P 1K8	-for The Canada RSP/RIF		
COURIER delivery:	50 O'Connor Street • Suite 201 • Ottawa, Ontario K1P 1J7			
f you require fur	50 O'Connor Street • Suite 201 • Ottawa, Ontario K1P 1J7 her information, please contact Customer Service d through the Payroll Savings Program		1 877 899-3599	
f you require fur	her information, please contact Customer Service		1 877 899-3599 1 800 575-5151	

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.