



# Subsequent Transactions

## 1. COMPANY AND INVESTOR INFORMATION (PLEASE PRINT)

English      PLEASE CHECK ONE     WFM SD       CLIENT NAME     OTHER SD  
 French  
 ACCOUNT TYPE      ACCOUNT NO.

Investor Name \_\_\_\_\_  Non-Registered       RRSP       RRIF  
 Joint Investor Name (if applicable) \_\_\_\_\_  \_\_\_\_\_       LIRA       LIF

## 2. NON- FINANCIAL CHANGES

Change Name (Include Appropriate Documents) \_\_\_\_\_ Name  
 Change Telephone Number to: Bus.: \_\_\_\_\_ Res.: \_\_\_\_\_  
 Change     Mailing Address \_\_\_\_\_ Street      Apt.  
 Registered Address \_\_\_\_\_ City      Province      Postal Code  
 Change Beneficiary to: \_\_\_\_\_  
 Change Applicant Signature \_\_\_\_\_ Previous Signature      New Signature

## 3. PURCHASE

Source of Funds:     Cheque     Proceeds from redemption     T2033  
                            TD2         T2151                             Other \_\_\_\_\_  
 Total amounts submitted \$ \_\_\_\_\_ , to be invested as follows:

\*In accordance with specific minimums in fund prospectus.

FUND NUMBER	FUND NAME	\$ AMOUNT	DEFERRED SALES CHARGE	FRONT END SALES CHARGE %	ACCOUNT NUMBER	PRE-AUTHORIZED CHEQUING* AMOUNT \$	SYSTEMATIC WITHDRAWAL* AMOUNT \$ OR %
TOTALS		\$ _____				\$ _____	\$ _____

## 4. SPECIAL INSTRUCTIONS OR ADDITIONAL INFORMATION

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## 5. AUTOMATIC WITHDRAWAL PLAN - (AWD)

Set up Automatic Withdrawal Plan     Change     Stop Systematic Withdrawal Plan    SWP Stop Date:                       
 FREQUENCY:     Semi-Monthly     Monthly     Quarterly     Semi-Annually     Annually     Commencement Date:                     

INCREASE AWD TO:	
DECREASE AWD TO:	
SWITCH AWD FROM FUND CODE:	TO FUND CODE: _____

**6. PRE-AUTHORIZED CHEQUING PROGRAM (PAC)**

Set up Pre-Authorized Chequing Plan    Change    Stop Pre-Authorized Chequing Plan   PAC Stop Date   M  M  Y  Y  Y  Y  

ADMINISTRATOR:  WFM Active    Fund Company Active

FREQUENCY:    Semi-Monthly    Monthly    Quarterly    Semi-Annually    Annually   Commencement Date:   D  D  M  M  Y  Y  Y  Y  

INCREASE PAC TO: \_\_\_\_\_

DECREASE PAC TO: \_\_\_\_\_

SWITCH PAC FROM FUND CODE: \_\_\_\_\_ TO FUND CODE: \_\_\_\_\_

**7. BANKING INFORMATION**

I/we hereby authorize The Fund Company to credit (in the case of an SWP or cash distribution) or debit (in the case of a PAC), the following account:  
 I/we hereby authorize Worldsource Financial Management Inc. to credit (in the case of an AWD) or debit (in the case of a PAC) the following account:

\_\_\_\_\_  
Name of Financial Institution

\_\_\_\_\_  
Branch Address

\_\_\_\_\_  
Transit Number                      Bank Number                      Account Number

Should my/our PAC cheque be returned due to insufficient funds:  
 In the case the PAC is administered by the fund company, I/we understand that the fund company may charge a handling fee to my account; or,  
 In the case the PAC is administered by WFM, I/we understand that WFM will charge my/our WFM account a \$30.00 NSF fee.

If SWP withdrawals are in excess of income and net capital appreciation, they will result in encroachment on, and possible exhaustion of, the capital invested. My/our financial institution is authorized to treat each debit as if I/we had issued a cheque authorizing such payment and debit.

**Staple VOID CHEQUE here.**

\_\_\_\_\_  
Investor's Signature                      Co-Investor's Signature

**8. REDEMPTION / CONVERSION**

Redemption   or    Conversion (Complete both sections 8 and 3)                      DSC                      Withholding Taxes  
 gross    net                       gross    net

SELL FUND NO.	FUND NAME	ACCOUNT NUMBER	SHARES/DOLLARS	ALL

Mail Proceeds of Redemption to: \_\_\_\_\_

ICS Proceeds to Branch Office: \_\_\_\_\_

Make cheque payable to Worldsource Financial Management Inc. in trust for (client) and ICS Proceeds to Head Office: 625 Cochrane Drive, Suite 700 Markham, Ontario L3R 9R9

**9. SWITCH**

Share Transfer (Transfer within same Fund Co.)                      Transaction Fee \_\_\_\_\_ %

F R O M	FUND NO.	FUND NAME	ACCOUNT NUMBER	SHARES	DOLLARS	ALL
T O	FUND NO.	FUND NAME	ACCOUNT NUMBER	SHARES	DOLLARS	ALL

**10. CLIENT AUTHORIZATION -**                      The undersigned acknowledges receipt of the latest prospectus of the relevant mutual fund, where applicable, and that Know Your Client information with the dealer is current.

**EQUITY INTEREST DISCLOSURE**  
 Guardian Capital Group Limited is a majority shareholder of Worldsource Holdings Corp, the holding company of Worldsource Financial Management Inc.

\_\_\_\_\_  
Signature of Investor

\_\_\_\_\_  
Signature of Co-Investor

\_\_\_\_\_  
Advisor's Name (please print)

\_\_\_\_\_  
Advisor's Signature

Branch Authorization

Dealer Authorization

  9  1  8  1    
Dealer/Agency

\_\_\_\_\_  
Adv./Agent

  D  D  M  M  Y  Y  Y  Y    
Date Completed