| Financial Group | | | | DEI | DEPOSIT REQUEST, INVESTMENT TRANSACTIONS AND PAC AGREEMENT/CHANGE (OTHER THAN RESP) INDIVIDUAL SAVINGS AND RETIREMENT | | | | F51-1 | 53A-1 | | | | | |
|---|---|--|--|---|--|--|---|------------------------|-------------------------------------|--------------------|---------------------------------------|---|--|---|---|
| Agency code | _e Agen | t co | de | S.L | | rade made Agent | by FundSERV n | etw | /ork: <mark>C</mark> ł | iecł | | | Trade made | by Extranet/Wel | b: Check here |
| Contract no. | | | | An | nuitant's | first and last i | name (in block lett | ers) | | | | | | FundSERV Dealer code | contract |
| | | | | | | | | | | | | | | | |
| | _ | | A SUBSEQU | ENT PREM | | | Transforture | | | | ¢ | → Co | | C – INVESTMENT I | NSTRUCTIONS |
| B | | | the client: \$ | INVESTME | | imum \$100) RM (AIT) | Transfer fron | n an | other ins | tituti | on: \$ | | Loan r | eimbursement: \$_ | |
| DIF: | Invest | : acc mon | ey in DIF cording to the I ey in DIF cording to the I | | | | ection C (minimu | ım \$ | S25/fund |) | | | DIF and GIF a FundSERV co | are not offered unde ntracts. | r |
| GIF: | Instructio | ons cula | - | , Y | | Y M | MDD | | Capital | Only | according to t | the INVE | STMENT INSTR | RUCTIONS in Secti RUCTIONS in Section INSTRUCTIONS in R | on C |
| C [| GUARAI Type of 1 mc | NTE inte onth | rest: 🗌 Simple | FUND (For A e Interest | Compo | | t 🗆 \$1,000)) | | the DIF | will STM | be invested ac ENT FUNDS (| cording t Minimur | o the AIT when t m \$25 per fund | he required minimu | amounts deposited i im has been reached estment fund numbers. |
| 0 (| or 5 = Deferred | Sales | s Charge (DSC, clien ge (CB, 3 years) | | | | | | | | Fund no | | If FEL, % of premiums | □ % or □ \$ | Order no. |
| IAG SRP Funds with 3 = Series 4 = Classic 75/75 I 5 = Ecoflex 7 = for the | 5 digits beginn 75/100 Funds of Series 75/75 F Prestige Series 100/100 | ing v ⁻ Seri unds) Fun for c | es 75/100 Prestige or Classic Series ds contracts issued | (e.g. 660 for the I The last digit refe 0 = Deferred Sale 1 = No sales char 3 = No sales char 5 = Front-End Loc charge) | rs to the sale s Charge (D ge (CB, 3 ye ge (CB, 5 ye | es charge: Sales cl SC, client) 7 = Pre ars) 2 = Pre ars) 4 = Pre | harge for the Prestige Ser estige DSC estige CB, 3 years estige CB, 5 years estige FEL | ries | 1. 2. 3. 4. 5. The t | otal (| | percenta | age must equal | 100% of the premiu | ms to be invested. |
| | | ΓEE | INSTRUCTI | ON | | | | | | | 1. | → Co | mplete Section F | - DECLARATION/SI | GNATURES |
| Ecoflex guara | intees | | Not allowed Not allowed in th | ne 10-year period | | ESET | tee maturity date. | | | | In the 10-year pe deferred by 10 y | eriod prior ears from 1 uitant's 60 | to the current guar the request date. Th th and 71st birthda | - | |
| 5, 13, 15,16 Ecoflex guara 6, 12, 17 and | intees | | In the 10-year pe deferred by 10 ye | | | arantee maturity | date, the maturity date | e will | be | | - | | | y and must be deferred | by 10 years from the |
| IAG SRP Ecof 100/100 | | | In the 15 years p will be reset once | prior to the matur e a year until the | ity date, or annuitant's | nly the guaranteed s 80th birthday. | d minimum value at de | ath | | | Between the ann to the current gu | | | y. No changes can be m | ade in the 15 years prior |
| Prestige 75/1 | es 75/100 and 00 Series 11, 21 and 31) | | Only the guarant 80th birthday. | eed minimum va | lue at deatl | h can be reset on | ce a year until the ann | uitan | ťs | | Not allowed | | | | |
| IAG SRP FORI (guarantee 31 | | | Only the guarant the annuitant's 8 | | lue at deatl | h in the Savings S | Stage can be reset onc | e a ye | ear until | | Not allowed | | | | |
| E 🗌 | SPECIAL | INS | STRUCTIONS | } | | | | | | Nev | v maturity date | | (Y Y N | | M M D D |
| If Fund Un | hat the transa its are credite | ctior d to | this contract for | arried out in acc the first time: I | confirm t | hat I have com | conditions and stip pleted electronic inv r which describes th | esto | r profile n | 0. 🗆 | | | | (to be included) or a klet. | paper profile (to be |
| X | | | icant/Subscriber | | | | Co-Applica e is a lump-sum pay) are politically expo | /mer | | | | | tered annuity co | | whether the individual |
| F51-1 | 53A-1(16- | | | | iA Financ Industria | ial Group is a busi I Alliance Insurar | ness name and tradema nce and Financial Serv | ark of 'ices | Inc. | | | | | F51-153A-1(16- | September 2016 09) PAGE 1 OF 3 |

| iA, | Financial Group | DEPOSIT REQUEST, INVESTMENT TRANS AND PAC AGREEMENT/CHANGE (OTHER THAN RESP) | | F51-153A-1 |
|--------------|---------------------------|--|--------------------------------|--|
| Agency code | Agent code | INDIVIDUAL SAVINGS AND RETIREME S.U. Agent | NT Agent's telephone number | Extension |
| | | | | |
| Contract no. | | Annuitant's first and last name (in block letters) | | FundSERV contract Dealer code Intermediary code |
| | | ۱ | | |

If these changes must be applied to other contracts, please list their numbers here:

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PRE-AUTHORIZED CHEQUE PAYMENT (PAC) GENERAL INFORMATION: A Allow 3 days for all changes

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If the bank account owner's signature is required, you must provide him or her with a copy. IMPORTANT

| 1. Indicate if it's a : | Instruction | Signature See below if bank account owner's or agent's signature is required in point 6. | |
|--|--|---|--|
| Regular PAC or onetime PAC enrolment | Complete items 3, 4 (regular PAC) and 5 | Signature of bank account owner mandatory | |
| Medification to bonking information | With changes to the payer complete item 5 | Signature of bank account owner mandatory | |
| Modification to banking information | Without changes to the payer complete item 5 | Signature of client or Agent without LTA | |
| ☐ Modification to regular PAC | Complete item 4 | Signature of client or Agent without LTA (A Except for AIT for PAC, the Agent with LTA required) | |
| ☐ Modification of a loan reimbursement | Complete item 4 | Signature of client or Agent without LTA | |
| PAC reactivation (regular or one-time PAC) | Complete item 4 For reactivation with modification to banking information, Complete item 5. | Signature of client or Agent without LTA (A Except for modification of banking information with changes to the payer, Signature of bank account owner is mandatory) | |
| Termination of PAC on: | Indicate: Immediate (Default) or Y Y Y Y M M D D After PAC dated: | Signature of client or Agent without LTA | |

2. Withdrawal Agreement: Variable

3. PAC Category: Personal Business (If both boxes are left unchecked, the PAC category will be deemed "Personal".)

4 PAC Information

| 4. PAC Informat | ion | | Frequency | Investment Instructions (AIT) | | | |
|---|----------------------------|------------|---|---|--|--|--|
| PAC TYPE | DATE Mandatory | Amount(\$) | Must be monthly for DIPLOMA PAC. | Minimum \$ 25 per Investment Fund. | | | |
| | Date of first PAC: | | Monthly (Day 1 to 28). Day: | AIT on PAC (Regular PAC not available for the Income Stage of the FORLIFE Series): | | | |
| Regular PAC | | | Last day of each month (regular PAC only) | % % | | | |
| or loan reimburse- | OR | | Day : (Monday to Friday) | % | | | |
| ment | Effective date of changes: | | Every 2 weeks. Day : | Daily Interest Fund (DIF) Guaranteed Interest Fund*(DIF): Interest type: *The GIF invest only through an AIT on DIF Term: | | | |
| | | | | | | | |
| | Date of one-time PAC: | | | Investment instructions for a one-time PAC: | | | |
| | Y Y Y Y M M D D | | | Investment Funds | | | |
| One-time | | | | % % | | | |
| PAC | or 🗌 Immediately | | Not applicable | % | | | |
| | | | | Daily Interest Fund (DIF) | | | |
| | | | | Guaranteed Interest Fund*(DIF): Interest type: | | | |
| | | | | *The GIF invest only through an AIT on DIF Term: | | | |
| 5. BANKING Account Number INFORMATION (max. 12 digits) | | | Transit Number Financial Institution Number (5 digits) (3 digits) | | | | |
| Financial inst | titution name: | | Name of the account owner(s): | | | | |

6. PAC/EFT STATEMENT / SIGNATURES

• By signing below, I, the bank account owner(s), confirm I have read, understand and agree to the information and provisions of the PAC/EFT Agreement in this Form.

• For a joint account, all required signatories must sign this PAC/EFT Agreement.

• For a Company, the PAC/EFT STATEMENT must be signed by an authorized signatory; attach a copy of the company's resolution stipulating the authorized signatories.

| Δ | | Х | Х | Х |
|---|------|---|--|----------------|
| | Date | Account owner's signature (as shown on bank records) | Account owner's signature (if required) | Agent/Witness |
| | | | | September 2016 |



PRE-AUTHORIZED CHEQUE PAYMENT ("PAC") AGREEMENT

In this PAC/EFT Agreement, each owner is referred to as "I" and makes the following statements in respect to himself or herself:

- I authorize the Company and the financial institution designated (or any other financial institution I may authorize at any time) to begin deductions as per my instructions for regular recurring payments and/or one-time payments from time to time for payment of all Premiums, deposits, instalments and charges arising from the Contract.
- Regular payments will be debited by the date and/or at the frequency I have chosen, whereas one-time payments from time to time can be debited from my account on any date. Regular and/or one-time payments will be debited in accordance with the banking information provided in this application.
- I agree that, for the purpose of this PAC/EFT Agreement, all PACs from my account will be treated either as Personal or Business* depending on the choice I have made in this application.
- I waive the right to receive pre-notification of an increase or decrease in the amount to be debited or a change in the date and/or frequency of these payments.
- I agree that the Company is not required to provide me with written notice of a change in a PAC amount that is made as a result of my request.
- If a PAC is dishonoured for any reason such as, but not limited to, insufficient funds ("NSF"), stop payment or account closed, the Company is authorized to resubmit the payment. Any charges incurred by the Company as a result of a dishonoured PAC will be charged within the Contract as per last PAC investments.
- I may cancel or modify this PAC/EFT Agreement at any time, subject to providing the Company thirty (30) days notice in writing. To obtain a sample cancellation form or for more information on my right to cancel the PAC/EFT Agreement, I may contact my financial institution or visit www.cdnpay.ca regarding Rule H1 Pre-authorized debits (PADs).
- Any cancellation of this PAC/EFT Agreement will not affect my insurance contract(s) and/or contract(s) for financial services, so long as payment is provided by an alternate method.
- The Company will not assign this PAC/EFT Agreement without providing, any time prior to the next PAC/EFT, written notice to me of the assignment.
- I have certain recourse rights if any PAC does not comply with this PAC/EFT Agreement. For example, I have the right to receive reimbursement for any PAC that is not authorized or is not consistent with this PAC Agreement. To obtain more information on my recourse rights, I should contact my financial institution or visit <u>www.cdnpay.ca</u> regarding Rule H1 Pre-authorized debits (PADs).
- Before the Company debits the first PAC/EFT payment, it must receive all required documents, duly completed, and be allowed a reasonable period of time to complete its administrative processes.

*Business PAC means a PAC for the payment of goods or services related to a business or commercial activity of the payor.

| Telephone number: 1-844-4iA-INFO (1-844-442-4636) Information: savings@ia.ca | | | | | |
|---|---|---|--|--|--|
| Quebec: 1080 Grande Allée West PO Box 1907, Station Terminus Quebec City, QC G1K 7M3 Fax: 418-684-5161 Transactions: IAQtransactions@ia.ca | Toronto: 522 University Ave., Suite 400 Toronto, ON M5G 1Y7 Fax: 1-800-810-0197 Transactions: IATtransactions@ia.ca | Vancouver: 2165 Broadway West PO Box 5900 Vancouver, BC V6B 5H6 Fax: 604-689-9682 Transactions: IAV-transactions@ia.ca | | | |