

To: Solium Financial Inc.

TFSA Account Number

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This letter is to advise that I wish to withdraw the assets of my Plan as follows:

- Cheque only
- Cheque Plus Securities _____

I am aware that I may not be eligible to re-contribute this amount back into my TFSA account until the following calendar year as advised by CRA.

Date _____ / _____ / _____
Month Day Year

- Partial Withdrawal Amount \$ _____
- Full Withdrawal Amount \$ _____

- Pickup by _____
- Mail
- To Account

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- EFT to bank (next business day)

Name _____ SIN Number _____
First Name Initial Last name

Address _____
Street Number & Name Suite Number

City Province

Postal Code Country

ADMINISTRATION USE ONLY

Total Value Closed \$ _____

Cheque Amount \$ _____