



**GROUP PLAN ELECTRONIC  
FUNDS TRANSFER CONTRIBUTION FORM**

**Administration Office**  
15 York Street  
Second Floor  
Toronto, Ontario  
M5J 0A3

**Plan Types**

- GROUP OPEN
- GROUP RSP
- GROUP RESP
- DPSP
- TFSA

**Group Plan Name** \_\_\_\_\_

**Group Plan Number** \_\_\_\_\_

**Date of Deposit** \_\_\_\_\_

Employee Name	Spousal RSP Y/N	Employee Social Insurance Number	GRSP / OPEN / TFSA		Group RESP Contribution Amount	DPSP Employer Contribution Amount	Total Contribution Amount
			Group Plan Employee Contribution Amount	Group Plan Employer Contribution Amount			
<b>TOTAL</b>			\$	\$	\$	\$	\$

\*Attach spreadsheet with above contribution information if more than 12 participants are included.

**TD Verification Code Number** \_\_\_\_\_ **Total Electronic Transfer Amount** \_\_\_\_\_

**Please ensure the following information is provided on the completed Group Plan EFT Contribution Form.**

1. Fill in Group Plan Name, Group Plan Number and Date of Deposit.
2. List individual employee contribution details in the section provided above. Attach a second page if needed.
3. Fill in Total Electronic Transfer Amount.
4. Telephone TD Bank to commence telephone transfer.
5. Fill in TD Verification Code number (received from TD upon completion of telephone transfer).

In order to ensure same day value, the completed form must be received at CI prior to 4pm EST on the date of the Electronic Fund Transfer.

A completed form received after 4pm EST will receive the value date of the next available business day.

Forward the completed form either by fax to the attention of 'CI Trust Accounting' at 416-364-6299 or 1-888-686-9415. Or by email to the email addresses, **CMMEFTDepositsTrustAccounting@ci.com** and **GroupPlans@ci.com**.

1910-2386\_E (10/19)