# MUTUAL FUND AUTOMATIC PURCHASE PLAN (APP) / AUTOMATIC WITHDRAWAL PLAN (AWD)

#### A ACCOUNT REGISTRATION:

**BMO** 

BMO InvestorLine Account Number (If new client, BMO InvestorLine will complete.)

InvestorLine

#### Nominee Registration

BMO Nesbitt Burns Inc. Attn: Mutual Fund Department 250 Yonge Street, 8th Floor Toronto, Ontario M5B 2M8 Dealer 9185 / Rep

Fund Company Account Number (if existing)

#### **B** ACCOUNT TYPE:

□ Investment Account □ RRSP □ Spousal RRSP □ RRIF (for AWD Plans only) □ TFSA

Note: Due to systematic limitations, only spousal purchase plans can run in spousal

### C BENEFICIAL ACCOUNT HOLDER INFORMATION (CLIENT NAME AND ADDRESS):

Applicant's Last Name	Applicant's First Name	Social Insurance Number	
Joint Applicant's Last Name	Joint Applicant's First Name	SIN	
Address	Province	City	Postal Code

Home Telephone Number

**Business Telephone Number** 

#### **Please check whether this is an:** Automatic Purchase Plan (BUY) Automatic Withdrawal Plan (SELL)

As a new Mutual Fund purchaser through a Pre-Authorized Plan (PAC) or Automatic Withdrawal Deposit (AWD), you are entitled to receive a printed copy of the Fund Facts document for any fund that you hold. Each Fund Facts is a 1-2 page document with key information about the specific mutual fund series you own, including past performance, costs, risks, and investment holdings. I want to receive the FundFacts by  $\Box$  mail or  $\Box$ e-mail

You will not have a right of withdrawal under securities legislation for subsequent purchases of a security of a mutual fund under the PAC/AWD, but will continue to have a right of action if there is a misrepresentation in the prospectus or any document incorporated by reference into the prospectus. Please note that you have the right to terminate your PAC/AWD at any time before a scheduled investment date.

You may also request the most recent copy of the Fund Facts at any time at no charge by contacting us at 1-888-776-6886 or at info@bmoinvestorline.com. Alternatively, you may view or download the most recent fund facts or simplified prospectus from SEDAR's website at www.sedar.com.

## **D** INVESTMENT DIRECTION

A separate application is required for each fund company.		Office Use Only
Fund Name (BMO InvestorLine approved funds only)	Fund Number	\$ Amount (Minimum \$50 per fund) FE DSC

 Start date:
 Frequency: 
 Twice a Month 
 Monthly 
 Quarterly
 Semi-annually
 Annually
 YY/MM/DD

Start Date (1<sup>st</sup> or 15<sup>th</sup> of the month):YY/MM/DD

**Dividends: I hereby authorize my/our dividends to be:** □ Reinvested □ Paid in cash

Note: Start date and frequency are subject to fund company purchase, redemption and frequency schedules

# **E** BANKING INFORMATION

Account Type :	🗆 Savings 🗆 Chequing	(simply attach a VOID	<b>cheque)</b> $\Box$ Same	as Beneficial Accountholder
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Accountholder:		
Name of Financial Institution		Address
City	Province	Postal Code
Account Number	Bank Number	Transit Number

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Client Signature	Client Signature (if Joint Account)	YY/MM/DD
Contributor Accountholder Signature (if not the client)	YY/MM/DD	
Office Use Only BMO InvestorLine Signing Officer	Branch Telephone Number	YY/MM/DD

# **TERMS AND CONDITIONS**

"BMO InvestorLine" means BMO InvestorLine Inc. and its agent BMO Nesbitt Burns Inc.

I/We hereby authorize the management company and financial institution named on the reverse to accept instruction from BMO InvestorLine, as indicated on my/our behalf to make electronic transfers of funds from my/our financial institution account to my/ our investment account in the case of an Automatic Purchase Plan (APP), or credit my/our BMO InvestorLine account in the case of an Automatic Withdrawal Plan (AWD).

Failure to deduct any amount shall give rise to no liability on the part of the management company or BMO InvestorLine, even if such failure results in loss or damage of any kind.

This authorization may be revoked upon 15 business days written notice by me/us to BMO InvestorLine. Any change in the account information provided in this authorization shall be provided 15 business days prior to the next due date of the preauthorized debit. Treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing you to pay as indicated and debit the amount specified to my/our financial institution account.

I/We understand and agree that a handling fee may be charged by the management company and/or BMO InvestorLine due to non-sufficient funds (NSF).

For accepting and complying with this authorization and any direction, I/we hereby waive notification of the aforemen-tioned transactions and hereby ratify any and all such transactions heretofore and hereafter made. BMO InvestorLine shall have no liability or responsibility for any loss or damage suffered or incurred by me in connection with the debits contemplated by this authorization and direction including, without limitation, any loss of interest, penalty under the Income Tax Act (Canada) or other losses or damages caused by, or resulting from complying with or any delay in com-plying with this authorization and direction. I agree to indemnify and hold BMO InvestorLine and the management company harmless against, and will pay BMO InvestorLine and the management company arising out of compliance with this authorization and direction.

This authorization and direction and the indemnity herein contained is a continuing one and shall remain in full force and effect unless revoked by me/us by prior written notice addressed and delivered to BMO InvestorLine and the man-agement company, but such revocation shall not affect any liability resulting from, or the waiver of liability and indem-nity relating to transactions initiated prior to such revocation. Revocation of this authorization and direction will not alter any other agreement existing between us.

This authorization and direction is not effective until accepted by BMO InvestorLine and the management company.

Return this form to:

BMO InvestorLine Inc. Transit #3973 250 Yonge Street Toronto ON M5G 1B1 Toll free: 1 888 776-6886