

Complete to setup recurring deposit to or withdrawals from your BMO SmartFolio account from another institution.

▶ BMO SmartFolio Client name		
Last name	First name	Middle initial
▶ BMO SmartFolio Acct #		▶ Account type
		<input type="checkbox"/> RESP <input type="checkbox"/> RRSP <input type="checkbox"/> Joint <input type="checkbox"/> TFSA <input type="checkbox"/> Individual (non-registered)

Section 1 | Financial institution information

▶ Bank account information																
I will attach <input type="checkbox"/> A personalized cheque drawn on a financial institution in Canada marked VOID	OR	<input type="checkbox"/> A bank document such as verification letter or bank statement from my financial institution with the following information:														
		<table border="1"> <tr> <td>Financial institution</td> <td>Branch</td> </tr> <tr> <td colspan="2">Address</td> </tr> <tr> <td>City</td> <td>Province</td> </tr> <tr> <td>Postal code</td> <td>Country</td> </tr> <tr> <td colspan="2">Bank account name</td> </tr> <tr> <td>Bank account number</td> <td></td> </tr> <tr> <td>Transit No.</td> <td>Institution No. Bank account No.</td> </tr> </table>	Financial institution	Branch	Address		City	Province	Postal code	Country	Bank account name		Bank account number		Transit No.	Institution No. Bank account No.
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Section 2 | EFT Service

▶ I want to transfer funds between my bank account and my BMO SmartFolio investment account as follows:	
I want to setup a:	
<input type="checkbox"/> Recurring deposit <input type="checkbox"/> Recurring withdrawal	
Start date (DD-MMM-YYYY)	Recurring fixed amount (\$50.00 minimum)
Frequency options for deposits or withdrawals (check only one):	
<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Twice a month (1st and 15th) <input type="checkbox"/> Twice a month (15th and LBD) <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi - Annual <input type="checkbox"/> Annual	

▶ For spousal RRSP accounts only
Please indicate if these contributions are:
<input type="checkbox"/> Regular contributions <input type="checkbox"/> Spousal contributions

▶ Optional
Maximum Amount on Recurring Deposits/withdrawals - \$ _____
I may increase the fixed recurring deposits/withdrawal amount at a later date, up to the specified maximum, through verbal or electronic instructions submitted to BMO Nesbitt Burns. When I want to increase above the current maximum amount, I will submit new written authorization. The maximum amount is the amount BMO Nesbitt Burns can withdraw per transaction from your bank account. It is not a reflection of your withdrawal limits on your bank account nor a reflection of the contribution limit on your registered account.

Section 3 Client agreements and signatures

I warrant all persons whose signatures on the BMO Nesbitt Burns Inc (“BMO NB”) account and bank account are required to sign for this Authorization. Additional signed documentation may be required if the account is other than an individual investment account

1. I authorize BMO NB to process electronic fund transfers between my investment account and my bank account designated above.
2. I will submit a new enrollment form if I wish to update my existing banking arrangements.
3. I may revoke my authorization at any time to cancel this agreement, subject to providing 10 days notice to BMO NB.
4. I direct BMO NB to act on any verbal/electronic instructions I give changing the instructions as to the amount, frequency, or participation in the EFT services (“Instructions”). I hereby release BMO NB from all liability and indemnify it from all costs and damages whatsoever in any way relating to or arising from any action take or not taken in relation to the agreement.
5. I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorised or is not consistent with this agreement. To obtain more information on my recourse rights and cancellation of this agreement, I may contact my financial institution or visit www.cdnpay.ca.

Account holder signature 	Date (DD-MMM-YYYY)
Account holder signature (if applicable) 	Date (DD-MMM-YYYY)

► **Mail completed form and supporting documentation of a voided cheque or bank issued document to:**

BMO SmartFolio
 BMO Nesbitt Burns
 First Canadian Place
 100 King St. W., Floor B1
 Toronto, Ontario M5X 1H3

For inquires call us at:
 Toll Free: 1-888-769-4444
 Toronto Local: (416) 594-5920

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