

**Peoples Christian Academy (PCA) Inc.**

|                                 |  |                  |                       |         |           |             |  |
|---------------------------------|--|------------------|-----------------------|---------|-----------|-------------|--|
| <b>Client Identification</b>    |  | Institution Name |                       |         | Account # |             |  |
| Account/Policy Holder Last Name |  | First Name       |                       | Initial |           |             |  |
| Address                         |  |                  |                       | City    | Province  | Postal Code |  |
| Home Phone Number               |  |                  | Business Phone Number |         |           |             |  |

|  |                                     |
|--|-------------------------------------|
| <b>Receiving Account/Institution Information</b> |                                     |
| <b>Receiver Information</b>                      | <b>Institution Information</b>      |
| Account Name                                     | Peoples Christian Academy Inc.      |
| Account Number                                   | 818M31A (CAD), 818M31B (USD)        |
| CCP#   | 830999553RR0001                     |
|  | TD Waterhouse Canada Inc.           |
|  | Transit 1253                        |
|  | P.O.Box 5999, Station F             |
|  | 77 Bloor Street W. TOR, ON, M4Y 2T1 |
|  | Dealer Code 9265                    |
|  | FIN# T007                           |
|  | DTC# 5036                           |
|  | CUID# GIST                          |

**Please fill in this form, submit it to your financial institution and send a copy of the filled form to [accounting@pca.ca](mailto:accounting@pca.ca).**

Dear Sir/Mdm,

Please arrange the following transfer from my Account specified above to the receiving account of Peoples Christian Academy (PCA) Inc., effective immediately.

|                        |  |
|------------------------|--|
| Equity Name            |  |
| Equity Code            |  |
| Number of Unit         |  |
| \$ Amt (if applicable) |  |

|                        |  |
|------------------------|--|
| Fund Name              |  |
| Fund Code              |  |
| Number of Unit         |  |
| \$ Amt (if applicable) |  |

Regards,

\_\_\_\_\_

Date: