



# Remittance Receipt for Policy Payments Only

500-5000 Yonge Street  
Toronto, ON M2N 7J8  
Telephone: 1-800-846-5970  
Fax: 1-800-661-7296

Policy Number: \_\_\_\_\_ Insured/Annuitant: \_\_\_\_\_

Date rec'd in Distributor's Office: DD / MM / YYYY Cheque maker if other than above: \_\_\_\_\_

### TYPE OF REMITTANCE

- Money Order\*
- Cheque
- Certified Cheque

\*Receipt signed by client must be submitted.

### FINANCIAL SERVICES

- T2033 Transfer
- Receiptable deposit \_\_\_\_\_ Annuitant  
\_\_\_\_\_ Spouse

### POLICY SERVICE

- Replacement for returned cheque
- Bank change
- Mode change

**SPLIT CHEQUE** for \$ \_\_\_\_\_

To be split among the following numbers:

# _____	\$ _____
# _____	\$ _____
# _____	\$ _____
# _____	\$ _____
# _____	\$ _____

### AMOUNT OF REMITTANCE

Premium											
Regular policy loan											
A.P.L. repayment											
P.D.F. payment											
Additional deposit											
Other											
<b>Total</b>											

Completed by: \_\_\_\_\_  
 Distributor: \_\_\_\_\_  
 Advisor: \_\_\_\_\_  
 Advisor #: \_\_\_\_\_

**HEAD OFFICE USE ONLY**

Applied by: \_\_\_\_\_  
 Dept.: \_\_\_\_\_  
 Date applied: DD / MM / YYYY  
 Date rec'd: DD / MM / YYYY  
 Status: \_\_\_\_\_  
 Suspense: \$ \_\_\_\_\_

## NOTES

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