

Letter of Direction

		EASE #: _	
Check the appropriate box:			
 My Investment Loan at your institution will be paid in full by I want to repay my RSP Loan at your institution. 	B2B Bank.		
Section 1 – To be completed by the client. All information	is MANDATORY.		
Borrower name	Name of financial institution		
Co-Borrower name	Address		
RSP / Investment Loan account number	City	Province	Postal code
	Contact name		
	Telephone number	Fax number	
Section 2 – Borrower instructions to transferring institution	n.		
 Upon receipt of funds to repay the loan detailed in Section 3, p Please forward the mutual fund or segregated fund collateral by B2B Bank: B2B Bank Financial Services Inc., B2B Bank S Please proceed with the enclosed Transfer Authorization for 	to B2B Bank or one of the Securities Services Inc., or E	following subsidia 32B Bank Interme	ries designated diary Services Inc.

Date (mm/dd/yyyy)	Borrower Signature	Co-Borrower Signature
Section 3 – To be complete	d by relinquishing institution and faxed to	B2B Bank at 1.866.941.7711.
RSP/Investment Loan account numb	per	
Principal balance outstan	M D Y ding, as at	(a) \$
Accrued interest		(b) \$
Any other amount owing (including fees & penalties)		(c) \$
	То	tal (a+b+c) \$
Per diem rate of interest	M	\$
Next payment due date		\$
Current market value of a	above RSP (if applicable)	\$