

\_\_\_\_\_  
(Date)

Olympia Trust Company  
1810, 125 – 9 Avenue SE  
Calgary, Alberta T2G 0P6

Attention: Registered Plans Division

Re: Self Administered Account# \_\_\_\_\_

I hereby authorize Olympia Trust Company to provide any information on  
the above account to:

\_\_\_\_\_  
(Name of Individual or Company)

I will provide written direction if I wish these instructions to be changed.

\_\_\_\_\_  
Annuitant Signature

\_\_\_\_\_  
Annuitant Name