

TD e-Series Funds

Checklist for Opening a TD e-Series Funds Account

This application can be used by existing TD Canada Trust customers to open Retirement Savings Plans or Personal Non-Registered accounts. For all other account needs please visit your local TD Canada Trust branch.

os to complete this package:
Account Application and Customer Investor Profile • Both documents must be completed in order to open a TD e-Series Funds Account. It will help you determine your Investor Profile and the optimal asset mix for your portfolio.
 Understanding and Consent Form A signed Understanding and Consent Form is mandatory and provides your acknowledgement of the terms and conditions for the TD e-Series Funds Account.
Please provide your TD Canada Trust account number or TD Mutual Funds Account number in the space provided.
Transaction Form • The Transaction Form is to be used if you are making purchases or setting up a Pre-Authorized Purchase Plan (PPP) to your TD e-Series Funds Account.
 Third Party Statement (if applicable) The Third Party Statement must only be completed if you answered "YES" to the question found in section 1 of the account application "Will someone other than the account holder(s) be making frequent deposits to or receive financial benefit from the account?" (Other than the account holder or Beneficiary named on the account application).
In order to avoid delay please complete correctly, sign and initial all applicable areas. Forward your completed documents to: TD e-Series Funds Administration Liberty Centre 3500 Steeles Avenue East Tower 5, Level 2 Markham, Ontario L3R 0X1

All applications are subject to approval by TD Investment Services Inc.

If you need assistance at any point in the application process simply visit <u>www.tdcanadatrust.com/mutual funds/tdeseriesfunds/account.jsp</u> and click on the "Contact Us" link on the right navigation bar.

Once we have received your completed and signed application, your account can generally be opened within two business days. As soon as your application has been processed, you will receive detailed confirmation via email. This will include information on how to access your new account.



TD e-Series Funds Account Application

Branch Use Onl					
	s Account # presentative Name			Ren Code I	Branch No.
Widtaar Fands Re	presentative (value			кер. code	Blanch No.
Choose only one:			Spousal		
☐ Retirement Sav	e v		☐ Yes ☐ No	TD Mutual Funds Acc	ount
	stered (Please ensure that Joint App	olicant completes sections 2,		TD Canada Trust Ban	k Account
1 Plagge Tell	Us About Yourself				
	☐ Miss ☐ Ms. ☐ Other _	□ M	Iale		Language of Correspondence
					English (if a Quebec resident see Section 7)
	Given Name	Initial(s)	Family Na	me	French
Social Insurance N	o	Date of Birth	MANDATORY	Note: Applicant must be	Note: TDIS accounts are only available to
Federal Government requ	nires your Social Insurance Number (SIN). You	must by law provide us with your SI		of legal Age of Majority.	Canadian residents
	e Canada Revenue Agency with reports of inco S			City	
Province		Country		Postal Code_	
Telephone home (Telephone business (
E-mail address (ma	andatory for TD e-Series Funds Ac				
Please complete if	mailing address is different from a	bove:			
Identification (Two original pieces of	MANDATORY	T	Dl 6 I		
ID required or existing TDIS account #):	Identification # MANDATORY	Туре	Place of Issuan	ce	
	Identification #	Type	Place of Issuan	ce	
Second vouch of custom	tification verified by: Initial: er identification is only required for new TDC1	Γ customers (authentication rules as pe	er KYC still apply). If identification is n	nissing from a customer's profile, a	a second vouch of customer identification is required
Employer's Address	SS		Occupation		
Have you borrowed	d money in order to make an invest	ment in this account?	Yes 🗌 No		
Using borrowed m	noney to finance the purchase of se	curities involves greater ris	k than a purchase using cash	resources only. If you b	orrow money to purchase securities,
	y to repay the loan and pay interes	-		-	
	ng read this disclosure. (please initi			Applicant	
Will someone othe	r than the account holder(s) be make	ring frequent deposits to or re	eceive financial benefit from	the account? \(\subseteq \text{No} \)	Yes (Please complete the Third Party Statement Form # 592018)
2 Fan a Jaint	Non Docistored TD o Cori	og Funda Aggaunt Dle	aga Camplata tha Fall	owina	<u> </u>
	Non-Registered TD e-Seri oint Account with right of survivor		ease Complete the Fon	owing	
☐ Mr. ☐ Mrs.	☐ Miss ☐ Ms. ☐ Other _				
		(Given Name	Initial(s)	Family Name
who is your	Social Inst		Date of	of Birth	Note: Joint Applicant must
Identification	Relationship MANDATORY			Yr	Mo Day be of legal Age of Majority.
(Two original pieces of ID required or existing	Identification #	Туре	Place of Issuan	ce	
TDIS account #):	MANDATORY Identification #	Туре	Place of Issuan	CP	
	tification verified by: Initial:				a second vouch of customer identification is required
			***		*
take instructions or hereby confirm the objectives.	directions from either of you along the time frame, objective and	e with respect to the Plan. A risk tolerance indicated in	Joint Plan with right of surv the Customer Investor Prof	ivorship is not available i ile for the account are in	on, and we are hereby authorized to n Quebec. You, the Joint Subscriber, a agreement with your own personal
Investment	Portfolio Value	Personal Net Worth		Personal	Age
Knowledge Limited	Under \$25,000 \$25,000 - \$49,999	What are your: Liquid Assets \$		Annual Income Under \$25.00	O vec
Average	\$50,000 - \$99,999			\$25,000 - \$49	
Above Average Sophisticated	e \$100,000 - \$499,999 \$500,000 - \$999,999			\$50,000 - \$74 \$75,000 - \$12	
Sopmsticated	Over \$1,000,000	Total Liabilities \$Estimated Personal N	Net Worth \$	\$75,000 - \$12 Over \$125,00	
Which of the follo	owing best describes the type of in	vestments vou currently o	wn, or have owned in the na	st?	
Little or no inv	-	Mostly GICs or Term	Deposits		
= '	or income mutual funds and/or equity mutual funds	A mix of money mark	et, bond and equity investmen	nts and/or mutual funds	
Employer		Employment Start Date	Type		
Employer's Addres	ss		Occup	pation	

	Please Complete this Section for Your Registered Plan							
a)	a) For a Spousal RSP Your spouse or common-law partner, whose name and personal data appear below, will be claiming these RSP contributions as a deduction.							
		•	mundutions as a deduction.					
	☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other Give	en Name	Initial(s)	Family Name				
	Social Insurance No Date of Birth	Yr Mo Day						
b)	Designation of Beneficiary							
	The space below may be used to designate a beneficiary for your Plan in the event of	of your death.						
	Name Given Name Initial(s)	Family Nan	ne R	elationship				
	Note: Your designation of beneficiary is subject to applicable law. Beneficiary desi or marriage contract. You may wish to discuss this designation with your legal advirevoked or changed automatically by any future marriage or divorce. Should you w to do so by means of a new designation.	sor. Your designation of a ben	eficiary by means of a desig	nation form will not be				
4.	Banking Information							
Ple ac	ease include your bank account information below. If your Bank account is NO company the application with your first purchase instructions.							
	you are applying to open a Joint Non-Registered TD Mutual Funds Account, the	e account(s) must be neid in t	ine name of each Joint App	шсапт.				
	nadian \$ Account Number							
Ac	count Holder's Name(s)							
Fi	nancial Institution	_ Institution Number	Branch Transit N	umber				
Fi	nancial Institution Address							
Ci	y	Province	Postal Cod	e				
US	\$ \$ Account Number							
Ac	count Holder's Name(s)							
Fi	nancial Institution	Institution Number	Branch Transit N	umber				
Fi	nancial Institution Address							
Ci	y	Province	Postal Cod	e				
	on-Registered accounts only (If not completed, investment income will be automatic case select one: Investment income from dividends and interest will be automatic linear income should be directed to my bank account. Investment income should be sent by cheque to the address noted	cally reinvested in additional u	nits.					
5.	Consent to the Collection, Use and/or Disclosure of Your Information	mation						
the Do ide pro rec	ou agree that, at the time you begin a relationship with us and during the course of relationship, we may collect, use and disclose your Information as described in Privacy Agreement (located in the TD Investment Services Inc. Disclosure comment) and on td.com, including for, but not limited to, the purposes of entifying you, providing ongoing service, understanding your financial needs, etecting us both from fraud and error, complying with legal and regulatory quirements, and marketing products and services to you by telephone, fax, and tomatic dialing-announcing device, at the numbers you have provided us, or by ernet, mail, email or other methods.	Your Information and a We may share informa	tion within the TD Bank Fin	ancial Group				
op co.	u may obtain our privacy code - "Protecting Your Privacy" - or review your tions for refusing or withdrawing this consent, including your option not to be ntacted about offers of products or services, by contacting your branch or calling at 1-866-222-3456.							
6.	Important Customer Information							
Ba M l'a	D Investment Services Inc. ("TDIS") is a separate company from and ank"). utual fund investments fluctuate in value and are not insured by assurance-dépôts du Québec and are not guaranteed by The Torpresentatives conduct for TD Bank. TD Bank is not responsible	y the Canada Deposit In conto-Dominion Bank.	nsurance Corporation TDIS is not responsib	n or the Régie de le for activities its				
	ou have read and hereby acknowledge the Important Customer Information	•	-					
	pplicant ☐ Yes							
Yo	ou acknowledge that the intended use of your account is for investing purposes.							

7. Application, Authorization, Disclosure, and Registration of Your Retirement Savings Plan

Unless otherwise indicated, throughout the application and in our other documents, the words "you", "your" and "yours" mean the applicant (and any co-applicant or other individuals with authority over the account). The words "we", "us" and "our" mean TD Investment Services Inc. (TDIS) and/or TD Bank Financial Group.*

Within two (2) business days of the acceptance of the first contribution to your TDIS Account, we will send you a current copy of the Simplified Prospectus for the Applicable Portfolio and/or Mutual Fund(s).

You hereby acknowledge that we will send you the TDIS Disclosure Document within two (2) business days of acceptance of first contribution containing the Declarations of Trust for Registered Plans, Statement of Policies, Statement of Related Issuers (Alberta residents only), Conflict of Interest Rules Statement (B.C. residents only) and Leveraging Disclosure Statement.

You understand that Mutual Funds subscriptions are made on the terms and conditions described in the prospectus and that it is subject to approval by TD Asset Management Inc. (TDAM). TDAM reserves the right to accept or reject any purchase order within one (1) business day of receipt of the order.

You acknowledge that for our mutual protection, TDIS will record all telephone calls by which your orders are placed.

If you are applying to open an "in-trust" account, you agree that:

you are liable to us for all liabilities and obligations respecting the account in your personal capacity and not as a trustee, agent or otherwise;

we have no obligation to observe the terms of any trust, whether written, verbal, implied, constructive or otherwise, and you are solely responsible for ensuring any restrictions of the trust and any applicable law are adhered to;

you will indemnify us against any loss, claim, damages, liability and expenses of any kind whatsoever arising out of operation of the account;

you have not relied upon us for any legal or tax advice and it is your sole responsibility to obtain appropriate professional advice to ensure your needs and objectives are satisfied;

Use of Information (Please ensure CustomerLink is updated.)

where the account is opened among two or more persons we are hereby authorized to take orders from any persons together or alone.

If you are applying to open a Joint Non Registered Account with Right of Survivorship (Joint Account with right of survivorship not available in Quebec): You declare that your interests in the joint account are as joint tenants with full rights of survivorship and not as tenants-in-common. In the event of your death, the entire beneficial interest in the joint account shall be vested in the surviving joint account holder(s) on the same terms and conditions as held, without in any way releasing the decedent's estate from the joint and several liability of the decedent account holder. We are hereby authorized to take to instructions or directions from either of you alone with respect to the Plan.

Your direction to open this joint account shall constitute your irrevocable direction to us to pay the balance of the account to the surviving joint account holder(s) on your death on request without making any further inquiries as to any claims by any other party, including your heirs, executors, estate trustees, administrators, assigns of the decedent account holder or any other third party and without any recognition of such claims.

You, the Joint Applicant, hereby confirm that you are in agreement with the time frame, objectives and risk tolerance indicated in the Customer Investor Profile for the account.

Request to register a TD Mutual Funds Retirement Savings Plan To The Canada Trust Company (the "Trustee"):

You hereby request that the trustee apply to register your Plan as a Retirement Savings Plan (the Plan) under the Income Tax Act (Canada). You understand that all references in the Declaration of Trust to the application or the Plan are to be read and understood as references to this application. You agree on behalf of yourself, your executors and administrators to be bound by the terms of the Plan. All contributions to the Plan are to be invested by the Trustee as directed by you in accordance with the terms of the Plan and held in your account subject to the terms of the Plan. You understand that all amounts received by you or your spouse or common-law partner from this Plan are taxable under the provisions of the Income Tax Act (Canada).

Most TD Mutual Funds charge an early redemption fee within a certain number of days after purchase. Please refer to the prospectus or ask a Mutual Funds Representative for applicability to the funds you are purchasing.

* The TD Bank Financial Group means The Toronto-Dominion Bank and its affiliates, who provide deposit, investment, loan, securities, trust, insurance and other products or services.

X		X		
Signature of Applicant/Annuitant	Date	Signature of Joint Applicant (if appl	licable)	Date
X				
Signature of Contributing Spouse or common-law partner (for spousal RSP only)	Date	Initial of Applicant/Annuitant - By i receipt of all required federal and/or	initialing you hereby acknow r provincial addenda.	rledge
For Québec Residents Only. Language Preference	_			
If you are a Québec resident, you agree with the following sta J'ai exigé que la présente formule et tous les documents s'y re			ed documents be in English.	Initial
Initial Contact:				Illitiai
☐ Advertising ☐ Branch Visit				
Referral				
☐ Phone Call ☐ Personal Meeting				
Branch Use Only				
Mutual Funds Representative Signature			Rep. Code	
Branch Manager Signature		Date:	Branch Manager Rep. Co	de
Branch Telephone #				
Checklist:				
☐ Customer Investor Profile (Form # 521894) - MANDA	TORY			
Transaction Form (Form # 595738) - For Lump Sum l				
☐ For transfers into TD Mutual Funds accounts (If applications)	able, please attach the app	ropriate transfer forms and a copy of a	a most recent statement.)	

TD Mutual Funds and TD Managed Assets Program are managed by TD Asset management Inc. and are distributed by TD Investment Services Inc. ("TDIS"), a wholly-owned subsidiary of The Toronto-Dominion Bank. Commissions, trailing commissions, management fees and expenses all may be associated with mutual fund investments. Please read the prospectus, which contains detailed investment information and is available from your dealer, before investing. Mutual funds are not covered by the Canada Deposit Insurance Corporation or by any other government deposit insurer and are not guaranteed or insured. Their values change frequently. There can be no assurances that a money market fund will be able to maintain its net asset value per unit at a constant amount or that the full amount of your investment will be returned to you. Past performance may not be repeated.

Investor Profile Questionnaire

The following questions will help us understand your financial picture and goals. If you have more than one goal – such as retirement, your children's education or a new home – complete a separate questionnaire for each goal.

The statements on this questionnaire that appear in blue are intended to help us fully understand your answers to some of the questions below. If one or more of these statements applies to you, please follow the directions provided.

low much money do you want to inv	est today? Lump Sum \$						
A. GENERAL QUESTIONS The following questions will provide about your investment knowledge which will ensure that the recomme with your financial circumstances.	and current financial situation,						
1. I describe my understanding about	investing as:						
	s are riskier than bonds. e capital markets and the different ments out there.						
What is the approximate value of y real estate)? Please include all inve registered) including ones held at o	stment accounts (RSP and non-						
☐ Under \$25,000 ☐ \$25,000 - \$49,999 ☐ \$50,000 - \$99,999	☐ \$100,000 - \$499,999 ☐ \$500,000 - \$999,999 ☐ Over \$1,000,000						
3. Your Personal Net Worth is calculated by adding your estimated Liquid Assets (i.e. Investments, Cash) and estimated Fixed Assets (i.e. Real Estate), minus your estimated Total Liabilities (i.e. Mortgage, Car Loans)							
What are your:							
Liquid Assets	\$						
+ Fixed Assets	\$						
= Total Assets	\$						
- Total Liabilities	\$						
= Estimated Personal Net Worth	\$						
If your net worth is \$0 or a negative amount reflects your situation —	nt, please select the option that best						
I am starting to invest and have a low	ng-term time horizon						
I have a high level of income and the	e ability to withstand a potential loss						
☐ I can manage a decline in the value o	of my investments because						
4. What is your personal annual incom	ne?						
☐ Under \$25,000 ☐ \$25,000 - \$49,999 ☐ \$50,000 - \$74,999	□ \$75,000 - \$125,000 □ Over \$125,000						
5. What is your current age?							
yrs.							
If you are over age 65 and indicated that y please select the option that reflects your	our annual income is under \$25,000, situation –						
☐ I have a high net worth of liquid asso	ets						
☐ I intend to use these funds as part of	f my estate						
☐ This account represents a small part	of my portfolio						
Other							

Pre-Authorized Purchase Plan (PPP) \$

B. PORTFOLIO OBJECTIVES The following questions will help define your investment goal for this particular account. This may include your desire for preservation of capital, need for investment income or interest in growing your investment.
6. Which of the following best describes your investment objective for this account?
a. I don't need any investment income at this time. Security of capital and liquidity is my primary concern
If you selected answer 6a, you will be assigned a Safety Profile. Please complete the questionnaire and move directly to Step 3.
7. How important is it for you to keep a portion of your account in relatively safe investments with minimal fluctuations?
a. Of critical importance 0 Points b. Very important 2 Points c. Important 2 Points d. Somewhat important 4 Points e. Unimportant 8 Points
If you answered question 6 d or e AND question 7 a or b, there is a conflict in your objectives. Please revise your answers or select one of the following options —
 □ I understand that a growth portfolio might not include low-risk investments, and that low-risk investments are of less importance to me than the overall investment objective for this account □ Other

Step 1 cont'd

Questionnaire cont'd

C. TIME HORIZON (cont'd)	
With this in mind, answer the following two questions:	(b) How many years do you need the funds in this account to last once
8. (a) How many years do you expect to be saving before beginning to withdraw from this account? a. I am no longer saving 1 Point b. Less than 3 years 1 Point c. 3 - 5 years 3 Points d. 6 - 10 years 7 Points e. Over 10 years 10 Points	you begin withdrawing? a. I don't plan to withdraw. 8 Points b. Less than 3 years 0 Points c. 3 - 5 years. 1 Point d. 6 - 10 years 4 Points e. More than 10 years 8 Points If you are over 65 and answered d or e in both questions 8(a) AND 8(b), please select the option that reflects your situation — I have a long-term horizon and do not require the funds in the short or mid term I intend to use these funds as part of my estate
D. RISK TOLERANCE There is always some degree of uncertainty (investment risk) associated with the growth that may be generated over any future period of time. Investment risk may be defined as the potential variation from the expected rate of return over a given period. The higher the return you are seeking, the more risk you must	11. Investments with higher returns typically involve greater risk. The following chart shows four hypothetical investments of \$10,000, each with a different potential best and worst outcome at the end of one year Which investment would you be most comfortable with?
be prepared to assume.	Potential Value of Investment After 1 Year \$12,400
9. Which of the following best describes the type of investments you currently own, or have owned in the past? a. Little or no investments	\$11,800 D \$10,900 B \$10,000 \$10,000 \$10,000 \$8,900 Worst Outcome \$8,400 a. Either \$10,900 or \$10,200 (Portfolio A) 1 Point b. Either \$11,200 or \$9,600 (Portfolio B) 4 Points c. Either \$11,800 or \$8,900 (Portfolio C) 6 Points d. Either \$12,400 or \$8,400 (Portfolio D) 8 Points
a. Portfolio A	If you selected answer 10a AND 11a, you will be assigned a Safety Profile. Please complete the questionnaire and move directly to Step 3. If you selected answer 10a and 11d, OR 10c and 11a, we don't have a clear enough picture of your risk tolerance to recommend an Investor Profile. Please revise your answer(s) or speak with a Mutual Funds Representative.
TOTAL POINT SCORES (Add scores for each section B, C and D) B. C. TIME HORIZON D. RISK TOLERANCE	Thank you for completing this questionnaire. Your answers will be carefully reviewed by a Mutual Funds Representative and may require further clarification to help us better determine your Investor Profile. Customer Signature Customer Name Joint Applicant Initials Mutual Funds Account
If you scored 16 or more in the Risk Tolerance section and: a) Answered "Limited" or "Average" in question 1 AND answered d or e in question 6, or b) Are over age 65 AND answered d or e in question 6, please revise your answer(s) or check below.	Mutual Funds Representative Signature Mutual Funds Representative Name Rep. # Date Branch Manager Signature

☐ I understand that investments fluctuate in value and it is possible to lose some or all of my investment. I am comfortable remaining invested during market fluctuations.

Find Your Investor Profile



Use your answers to find the Investor Profile that's right for you. The example below shows you how.

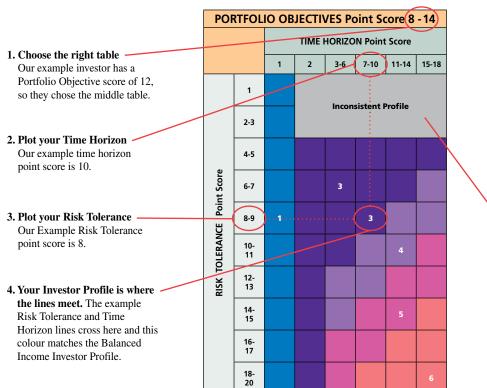
Example

Portfolio Objectives

10 Time Horizon

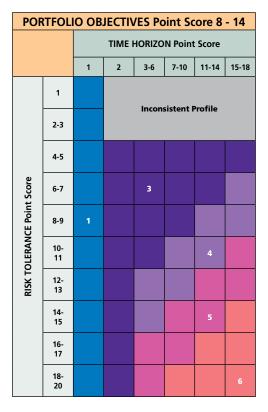
8 Risk Tolerance

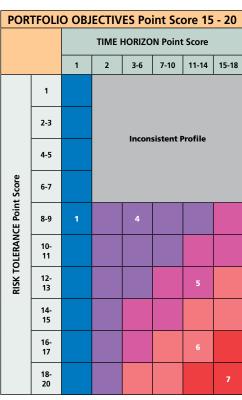
Representative¹.



5. An Inconsistent Profile (IP) results when the Risk Tolerance answers you provided are inconsistent with the Portfolio Objective answers. You may wish to revisit the questions in these two sections to modify potentially conflicting answers. If a review of these questions still results in an Inconsistent Profile then you will be assigned a "Safety Profile". Please speak with your Mutual Funds

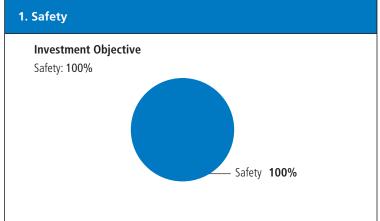
PORTFOLIO OBJECTIVES Point Score 1 - 7							
TIME HORIZON Point Score							
1 2 3-6 7-10 11-14 15-1							
	1						
	2-3			2			
	4-5						
t Score	6-7					3	
CE Poin	8-9	1					
RISK TOLERANCE Point Score	10- 11					4	
RISK TO	12- 13						
	14- 15						
	16- 17					5	
	18- 20						

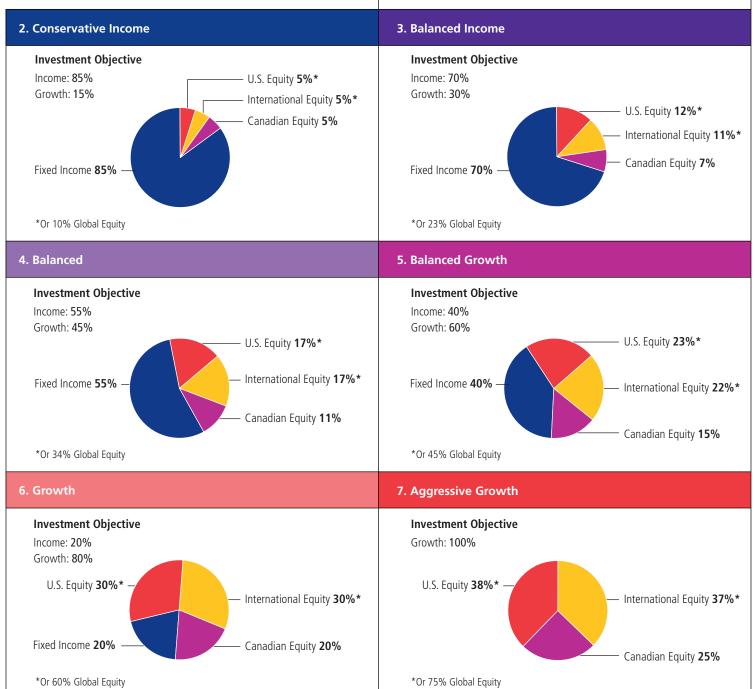




Investor Profile cont'd

Match your colour from the previous page to the colour bars below to find your Investor Profile and recommended investment options.





TD Managed Assets Program Portfolios (e-Series)

These are the recommended, professionally managed TD Managed Assets Program (TD MAP) e-Series Portfolios² for each of the Investor Profiles. The asset allocation and fund selection in TD MAP Portfolios are carefully determined by our team of professional Portfolio Managers.

Please note that investors cannot change the fund selection or the percentage of the portfolio each fund represents.

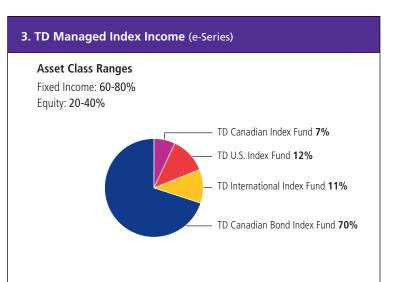
TD MAP e-Series Portfolios require an initial minimum investment of \$2,000 and \$25 for a Pre-Authorized Purchase Plan (PPP). PPP purchases are only permitted if the initial TD MAP minimum investments are satisfied.

Asset Class Ranges

Fixed Income: 10-30% Equity: 70-90%

TD Canadian Bond Index Fund

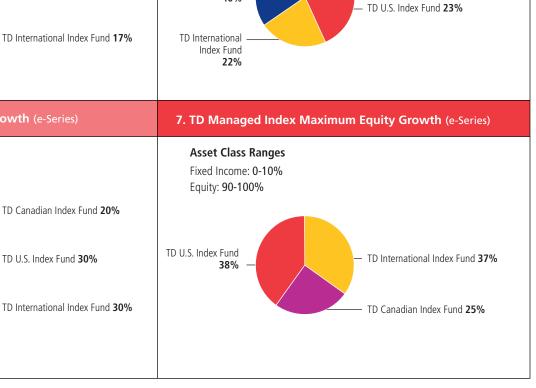
20%



4. TD Managed Index Income and Moderate Growth (e-Series) 5. TD Managed Index Balanced Growth (e-Series) **Asset Class Ranges** Asset Class Ranges Fixed Income: 45-65% Fixed Income: 30-50% Equity: 35-55% Equity: 50-70% TD Canadian Index Fund 11% TD Canadian Index Fund 15% TD Canadian TD Canadian Bond Index Fund Bond Index Fund TD U.S. Index Fund 17% 40% TD International Index Fund 17% TD International Index Fund 22% 6. TD Managed Index Aggressive Growth (e-Series)

TD Canadian Index Fund 20%

TD U.S. Index Fund 30%



TD Mutual Funds (e-Series)

These are the available TD e-Series Mutual Funds³. Select funds from each category to build your portfolio. We recommend that you keep within the Asset Mix guidelines in the Portfolio Worksheet below. You may also choose from TD Mutual Funds Investor Series funds. To view all TD Mutual Funds

Click here

(or go to www.tdcanadatrust.com/mutualfunds).

Minimum Purchase

Lump Sum: \$100/fund

Pre-Authorized Purchase Plan (PPP): \$25/fund

Fixed Income

TD Canadian Bond Index Fund - e

Canadian Equity

TD Canadian Index Fund - e

U.S. Equity

- TD Dow Jones Industrial Average Index Fundsm e
- TD Dow Jones Industrial Average Index Fundsm (\$US) e
- TD U.S. Index Fund e
- TD U.S. Index Fund (\$US) e
- TD U.S. Index Currency Neutral Fund e
- TD Nasdag® Index Fund e

International Equity

- TD European Index Fund e
- TD International Index Fund e
- TD International Index Currency Neutral Fund e
- TD Japanese Index Fund e

Step 4

Portfolio Worksheet

This worksheet will help you determine your investment in a TD Mutual Funds Portfolio.

- A. Enter your asset mix as determined by your Investor Profile in Step 2.
- B. Enter the amount you have to invest.
- C. List the funds you selected in Step 3 and the percentage each represents. Then calculate the actual dollar amount (total investment x X%) for each fund. For TD MAP Portfolios, simply write the name of your recommended portfolio. No calculations are required.

A. Asset Mix:		C. Fund Name(s)	%	\$ Amount
Safety	%			
Fixed Income	%			
Canadian Equity	%			
U.S. Equity	%—— (an Clabal Fauity)			
International Equity	% (or Global Equity)	%		
B. Amount to invest:				
Lump Sum	5			
Pre-Authorized Purchase Plan (PPP)	5			
PPP Effective Date				
PPP Frequency				
			Total 100%	\$

For more information, please speak with a Mutual Funds Representative¹ at your TD Canada Trust branch, call 1-800-281-8029 or visit www.tdcanadatrust.com/mutualfunds

Commissions, trailing commissions, management fees and expenses all may be associated with mutual fund investments. Please read the prospectus, which contains detailed investment information, before investing. Mutual funds are not covered by the Canada Deposit Insurance Corporation or by any other government deposit insurer and are not guaranteed or insured. Their values change frequently. There can be no assurances that a money market fund will be able to maintain its net asset value per unit at a constant amount or that the full amount of your investment will be returned to you. Past performance may not be repeated.

TD Mutual Funds and TD Managed Assets Program are managed by TD Asset Management Inc. a wholly owned subsidiary of The Toronto-Dominion Bank. Available through TD Investment Services Inc. (principal distributor).

- ¹ Mutual Funds Representatives with TD Investment Services Inc. distribute mutual funds at TD Canada Trust.
- ² Portfolio holdings are as of July 23, 2010 and are subject to change.
- ³ TD e-Series and Investor Series funds may be held in a TD e-Series Funds Account.
- TD Mutual Funds, TD Managed Assets Program and TD MAP are trade-marks of The Toronto-Dominion Bank, used under license.





TD e-Series Funds utilize the power of the Internet and other cost saving technologies that allow TD Investment Services Inc. (TDIS) to keep expenses lower and pass the savings on to me.

I hereby acknowledge and consent to the following terms and conditions of the TD e-Series Funds Account:

- 1. I have registered for TD Canada Trust EasyWeb Internet banking ("EasyWeb"), or will register for any other service or delivery channel as TDIS may advise in the future, and I hereby accept the terms and conditions pertaining to the use of EasyWeb or such other service or delivery channel.
- 2. I shall manage my account and correspond with TDIS exclusively via electronic means through EasyWeb and email, except as indicated below, as the TD e-Series Funds Account is electronic only.
- 3. TDIS will deliver all statements, trade confirmations, prospectuses, annual reports, semi-annual financial statements, and all other materials (the "Documents") electronically. TDIS will notify me by email when Documents are ready for viewing. Trade confirmations will be posted for 60 days. All other Documents will remain available for viewing until they are replaced with more recent versions.
- 4. TDIS will make all Documents containing account information accessible in a designated area within EasyWeb or an alternative service or delivery channel.
- 5. I am responsible for viewing and downloading the Documents after TDIS alerts me by email that they are available for viewing. I understand that I will require Adobe Acrobat Reader or other document viewing software, as TDIS may advise from time to time, to read some Documents.
- 6. Paper Documents are available at no cost, and I may request delivery of paper Documents by regular mail at any time. However, any such request, except in the event of an EasyWeb or alternative service or delivery channel service interruption, may be considered by TDIS, at its sole option, to constitute a revocation of this TD e-Series Funds Understanding and Consent by me.
- 7. In the event of an EasyWeb or alternative service or delivery channel service interruption, I will be able to contact TDIS by telephone through TD Canada Trust's EasyLine telephone banking service, or the alternative service or delivery channel by telephone (if applicable), and such telephone contact does not constitute a breach of this TD e-Series Funds Understanding and Consent.
- 8. TDIS may, at any time, at its option, satisfy any Document delivery obligations by regular mail, without changing the nature of the TD e-Series Funds Account.
- 9. I will advise TDIS promptly, in writing, by regular mail, of any change to my email address.
- 10. TDIS may amend any or all of these terms and conditions at any time upon notice to me and I agree to be bound by them.
- 11. I may, at any time, revoke this TD e-Series Funds Understanding and Consent, which has the effect of revoking my consent to electronic delivery of Documents. Upon such revocation, I will no longer be eligible to hold e-Series units of TD Mutual Funds or TD Managed Assets Program Portfolios, and TDIS may, upon notice to me, switch all of my e-Series units into the corresponding Investor Series units and my TD e-Series Funds Account will thereby be converted into a TD Mutual Funds Account or TD Managed Assets Portfolio Account, as the case may be, or TDIS may redeem my e-Series units.

Applicant Name	Signature of Applicant	Date	
Joint-Applicant Name	Signature of Joint-Applicant (if applicable)	Date	



TD Investment Services Inc. Personal Information

Name	Given Name					Family Name		
Source/Settlemen	t							
	ccount on the new account ap	olication for this t	ransaction.					
	made payable to TD Investm	•						
☐ Transfer from an existing	ng RSP account, Non-Registe	red account, or Ta	ax-Free Savings	s Account.				
Transaction Info	rmation							
Purchase: Non-Re								
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Bank Account held by you direct and warrant that all persons whe any time upon 30 days prior not your right to cancel this Author not relieve you of your obligation scheduled debit, and in the case of the change. Delivery of this accordance with this Authorizat example, you have the right to a Bank Account in the case of a F date on which the disputed transcase of all Business PADs and I Association Rule H1, which requirements are separations of the part of	, amounts debited to pay any amo ctly to the TD Mutual Funds Acco soes signatures are required to debitice. Such notice may be in writing ization, please consult with your from to pay the amounts owing und of debits occurring on a frequence Authorization to us constitutes deiton including, but not limited to, treceive reimbursement for any determinated to your Bank a Personal PAD or Business PAD, a saction was posted to your Bank a puritie us to provide you with a separate copy of this Agreement and in the property of the provide you with a separate copy of this Agreement and in the property of the provide you with a separate copy of this Agreement and in the property of the provide you with a separate copy of this Agreement and in the provide you with a separate copy of this Agreement and in the provide you with a separate copy of this Agreement and in the provide you with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of this Agreement and in the provide your with a separate copy of the provide your with a separate your with a sep	ount that is the subjet the Bank Account g or may be given or inancial institution of er the Agreement. Y y less than 10 days, livery by you to the he amount and fulfipit that is not authorideclaration must be count. To obtain ruthorization, you he trate summary of yo ecord any modificat	ct of this Agreemare providing this rally (if we are about visit www.cdnp/ou will inform us this Authorization Deposit Bank. Th Illment of purpose used or is not conscompleted and senore information of the waive any prur instructions in the constant of t	ent, in which cases Authorization of let to verify your bay, ca. Revocation is in writing of an a shall be amend to be peopsit Bank. You have cert sistent with this a cent to the Deposis on your recourse re-notification resections 4 and 6 uctions in order	se, the debit will be procor have provided a separ identity). To obtain a sign of this Authorization by change in the Bank A led by us in respect of d is not required to verify ain recourse rights if an Authorization. In order it Bank not more than 90 rights, you may contact quirements as specified of this Agreement, and to prevent any delays ar	ressed as a Funds Tr ate authorization. The imple cancellation for does not terminate a cocunt at least 10 de ebits occurring 10 de that a debit to the By debit does not com to be reimbursed for 0 calendar days or 10 t your financial instit by sections 15(a) an any changes thereto id/or denied transact	ansfer PAD. You hereby a his Authorization may be orm or for more information part of this Agreemen tys prior to the next regularys from receipt of your mank Account has been many by with this Authorization any disputed debit made a business days respective tution or visit www.cdnpt d(b) of the Canadian Pay 10 calendar days prior to ions with respect to your	assure us cancelled a ion regardin thand does arly notice to us ade in on. For to your ely after the ay.ca. In they ments of acting upon fund
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Within two (2) business da	ays of acceptance of a purch or the applicable Mutual Fu	ase, TD Investme	ent Services In	c. (TDIS) will	l send you a current	copy of the Simp	plified Prospectus (ur	aless we
TD Asset Management Inc.	reserves the right to accept of	r reject any purch	ase order withir	n one (1) busir	ess day of receipt of	the order.	1 1	
Commissions, trailing comm	missions, management fees an fore investing. Mutual funds a	d expenses all ma	ay be associated	l with mutual t	fund investments. Ple	ase read the prosp	pectus, which contains	detailed
investment information, bet guaranteed or insured. Their	fore investing. Mutual funds a r values change frequently. Th	re not covered by here can be no ass	the Canada De surances that a r	posit Insuranc monev market	e Corporation or by a fund will be able to	any other governn maintain its net as	nent deposit insurer an set value per unit at a	d are not constant
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Customer Signature X				Date		Note	e: Transaction Date is late account is opened.	based on
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	e					Branch Manager	kep. Code	
Comments/Additional li	nstructions:							
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Account Name: (Include	es Credit Facility)				
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Name of Branch/Departs	ment/Region:				
					he customer(s) designated as atrol over the assets in the
For an account that is to	be used for or on be	ehalf of a third party	(Person or Business),	please complete the following	owing:
Third Party's Nar	me *	7	Γhird Party's Address	S	Third Party's Occupation or Nature of Business
Relationship to Account Holder	Date of Birth mm/dd/yyyy		oration Number* plicable)		f Business Incorporated (if applicable)
Third Party's Nar	ne *	5	Third Party's Address	S	Third Party's Occupation or Nature of Business
Relationship to Account Holder	Date of Birth mm/dd/yyyy		oration Number* blicable)		f Business Incorporated (if applicable)
Third Party's Nar	ne *	5	Third Party's Address		Third Party's Occupation or Nature of Business
Relationship to Account Holder	Date of Birth mm/dd/yyyy		ooration Number* blicable)		f Business Incorporated (if applicable)

NOTE: Completed forms must be sent to the BSC in the appropriate NCL coloured bag/envelope.

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^{*} BIN only required for Incorporated Businesses. If additional space is required, please use the back of this form.