



Enrolment Form

The Toronto-Dominion Bank (the "Bank") Dividend Reinvestment Plan

	To: CST Trust Company ("CST")					
Please refer to the Plan Offering Circular before enrolling	I wish to enrol in the Bank's Dividend Reinvestment Plan (the "Plan") in order to reinvest □ all; or □ % of cash dividends received in common shares of the Bank.					
Copies are available online at: www.canstockta.com or www.td.com	Circular containing and describing the Plan			lled in the Plan, acknowledge that I have read the Plan Offering an and that my participation in the Plan will be subject to its that my enrolment in the Plan will remain in effect until I dance with the Plan.		
PLEASE PRINT CLEAR	RLY – To avo	id delays and ensure your er	rolment	, please complete <u>all</u> fiel	ds	
First Shareholder Name:			Date of	Birth (DD/MM/YYYY):	Occupation:	
Second Shareholder Name (if applicable):			Date of	Birth (DD/MM/YYYY):	Occupation:	
Third Shareholder Name (if applicable):			Date of	Birth (DD/MM/YYYY):	Occupation:	
Address: (street number,	street name, a	appartment number and/or suite	e – P.O. b	oxes are not sufficient):		
Postal code or Zip:		Country		Daytime Telphone:		
S.I.N. / T.I.N.:	N. / T.I.N.: Shareholder Account Numb			Shareholder Email (optional):		
Your Shareholder Account Nu	ımber is located	on your dividend cheque.				
hareholder Signature Second Shareholder Signature (if applicable)		Third Shareholder Signature Date (DD/MM/YY) (if applicable)				

Instructions:

- 1. IMPORTANT: If shares are held by a corporation, partnership, association, agency, estate or trust, this form must be signed by a duly authorized signing officer whose title must be provided. CST may require submission of satisfactory evidence of authority of the person executing the form.
- 2. If shares are jointly held, all shareholders must sign this form.
- 3. If your shares are held in more than one account, a separate enrolment form must be completed for each account that you wish to participate in the Plan.
- 4. Non-registered beneficial holders (i.e., shareholders who hold their shares through an intermediary, such as a financial institution, broker or other nominee) should consult with that Intermediary to determine the procedure for participation in the Plan.
- 5. For inquiries, please contact CST Trust Company. at 1-800-387-0825 or inquiries@canstockta.com.
- 6. Once completed, please return the form to:

CST Trust Company P.O. Box 4229 Station A Toronto, ON M5W 0G1 Fax: 888-488-1416

Note:

CST is soliciting this information in compliance with the Plan and Anti-Money Laundering and Anti-Terrorist Financing legislation. All information will be held in accordance with our Privacy Policy located at http://www.canstockta.com/privacyPolicy.do