

Electronic funds transfer (EFT) for payout annuity products



Fast, Efficient, Dependable

With EFT, you do not have to worry about delayed or lost cheques. Your payments are **deposited directly into your bank account**.

To receive your payments through our Electronic Funds Transfer system, complete this form, sign it and return it along with a void cheque or direct deposit form from your bank.

Contract/policy number	Contract/policy number	Contract/policy number	Contract/policy number
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1 Recipient of payments

Sun Life Assurance Company of Canada reserves the right to decline this request if we cannot determine that the requestor signing the form has a contractual right to receive payments or proceeds under this policy.

First name	Middle initial	Last name	
Street address (street number and name)			Apartment or suite
City	Province		Postal code
Date of birth (dd-mm-yyyy)	Social Insurance Number (for taxation purposes)		Telephone number

2 Banking information for Electronic Funds Transfer

I authorize Sun Life Assurance Company of Canada to deposit payments directly into the attached account. I understand I may change or terminate this authorization by giving the Company ten days notice in a form acceptable to the Company.

NOTE: A personalized cheque marked VOID or a direct deposit form obtained from your bank must be attached to confirm banking information.

If the bank account holder is different than the recipient, complete the following information on the account holder.

First name	Middle initial	Last name		Relationship to recipient
Street address (street number and name)			Apartment or suite	Date of birth (dd-mm-yyyy)
City	Province		Postal code	Telephone number

If you are signing this by Power of Attorney and have not already provided us with a General or Enduring Power of Attorney document, please send it to us with this form. **Please note that Personal Care and Banking Powers of Attorney are not acceptable.**

Signature of requestor X	Date (dd-mm-yyyy)
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Send this form and a copy of a void cheque/direct deposit form to:

Sun Life Assurance Company of Canada
Attention: Document Centre 300B25
227 King Street South, PO Box 1601
Waterloo ON N2J 4C5
Fax: 1 866 487-4745