

Request for the pre-authorized chequing ("PAC") plan

Select one of the tw	o options below and proceed	d:			
Option A – Establ	lish PAC to pay, by monthly wi	thdrawal, monthly premiu	ms only		
☐ Option B – Establ	lish PAC as above, except incr	ease monthly withdrawal	to include policy le	oan repayments	
Please establish the	PAC plan as indicated below	w:			
Policy number	Owner of policy (first, middle, last / corporate name)		Option A/B	Withdrawal day (1-31*)	Monthly loan repayment amount
* If 29, 30, or 31 is se	elected, for a month having r	no such date the last da	y of the month w	ill apply.	
Account information	n: NOTE: a sample chequ	ue marked "VOID" must	be attached.		
Name of financial institution		Transit number	Bank number	Account number	
Address of financial institu	ution			•	
Print name of account holder, as shown on institution's records (first name to last) Print name of any joint account holders (first name to last)					
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 When you sign below, you agree that: The PAC plan will commence, for the policy(ies) identified above), on or after the date of this Request. You authorize Canada Life and your financial institution to regularly withdraw from your account any payments that you have agreed to make under this agreement as though you had personally signed a cheque. You consent to Canada Life's collection, use, retention and exchange of personal information concerning you, in your capacity as account holder and only as required for purposes relating to this PAC plan. You understand that provisions of or changes to the policy(ies), including, as applicable, to premium amounts or to the method or required amount of payment, or termination and recommencement of the PAC plan, may increase or decrease the monthly amount withdrawn from your account. Accordingly, you authorize such increases or decreases, waiving any pre-notification requirement with respect to them. You will notify Canada Life in writing within 90 days of the withdrawal or account changes, you will notify Canada Life in writing within 90 days of the withdrawal or account changes, you will notify Canada Life in writing within 90 days of the withdrawal or account changes, you agree that the withdrawal or account changes, you will notify Canada Life to make the withdrawal or account changes, you will notify Canada Life to make the withdrawal or account changes, you agree that the withdrawal or account changes will be considered to have been properly made. If there is not enough money in your account to to ever the total monthly amount, you authorize Canada Life to make a second attempt to withdraw that amount or, where applicable, any shortfall after the first attempt. If the banking information has not been received, and the second attempt is also returned for non-sufficient funds ("NSF") you understand the pre-authorized payments will be supplied to you understand the pre-authorized payments will be pre-authorized payments will					
Signature of account holder (as you sign your cheques)		Signature of joint account holder, if required for account (as you sign your cheques) Date (d/m/y)			ie (u/11/y)
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Copy of the Agreement for the pre-authorized chequing ("PAC") plan To be given to the account holder

- The PAC plan will commence, for the policy(ies) identified above), on or after the date of this Request.
- You authorize Canada Life and your financial institution to regularly withdraw from your account any payments that you have agreed to make under this agreement as though you had personally signed a cheque. You consent to Canada Life's collection, use, retention and exchange of personal information concerning you, in your capacity as account holder and only as required for purposes relating to this PAC plan. You understand that provisions of or changes to the policy(ies), including, as applicable, to premium amounts or to the method or required amount of payment, or termination and recommencement of the PAC plan, may increase or decrease the monthly amount withdrawn from your account. Accordingly, you authorize such increases or decreases, waiving any pre-notification requirement with respect to them.
- You will notify Canada Life if your financial institution, branch or account number changes. To continue withdrawals without interruption, notice of any change is required 14 days before the next withdrawal date. Canada Life may, but is not obligated to, rely on verbal instructions from you to amend this authorization.
- You certify that all persons whose signatures are required to sign on this account have signed below, including any required joint account holder.
- You understand that if ownership of a policy is transferred, the PAC plan will no longer apply with regard to that policy unless you notify Canada Life otherwise.

- You agree to regularly review your account information and if you question or disagree with the amount withdrawn or any account changes, you will notify Canada Life in writing within 90 days of the withdrawal or account changes; otherwise, you agree that the withdrawal or account changes will be considered to have been properly made.
- If there is not enough money in your account to cover the total monthly amount, you authorize Canada Life to make a second attempt to withdraw that amount or, where applicable, the shortfall after the first attempt. If the banking information has not been changed, or a replacement payment has not been received, and the second attempt is also returned for non-sufficient funds ("NSF"), you understand the pre-authorized payments will be suspended. You understand that you are responsible for any NSF charge(s).
- The PAC plan may be terminated if any withdrawal is not permitted or is reversed by the financial institution, or upon 10 days written notice, given by you to Canada Life or by Canada Life to you or the owner(s).
- If you are not also the owner, you authorize Canada Life to share with the owner any information relating to this PAC agreement, including your payments and their source, as well as revisions to or replacements of this agreement.