



Policy No.		Name of policyowner(s)	
Representative name		Representative code	Field office code

GAIN - All of the following transactions could generate a taxable gain. Please contact your representative for details.

POLICY TERMINATION

Please terminate my policy and issue payment of any cash surrender value. As a result of this choice, I understand that, as of the date of my request, I will no longer have any rights under this policy and that, if the insured dies before the cash surrender value is paid, the Desjardins Financial Security Life Assurance Company's (hereinafter called "Desjardins Insurance") liability will be limited to payment of said value. If applicable, registration for tax purposes will be cancelled and any amounts withheld at source as required by law will be deducted from the surrender value payable. (Return the policy contract with this form.)

The termination of this policy and the payment of the cash surrender value are conditional upon the approval of a new application.

Yes No Application number _____

POLICY LOAN

I request a policy loan of \$ _____. In accordance with the terms and conditions of my contract, the interest rate will be fixed or variable. I acknowledge that this policy loan and accrued interest constitute a debt that is deductible from any benefit or cash surrender value payable under the contract.

PARTIAL SURRENDER - Applicable ONLY at the end of the current investment period

I hereby direct Desjardins Insurance to make the following payments from the accumulated funds:

Effective Date Y | Y | M | M | D | D must be no earlier than the date the form is signed.

Amount	Investment / contract account

- The amount withdrawn will be net of Market Value Adjustment plus surrender charges (if applicable).
- If death benefit type is level, the amount of insurance will be reduced by the amount indicated in number 1 above.
- The total minimum withdrawal is \$200.00.
- This section of the form is not to be used to terminate the policy.
- For policies sold prior to January 1, 2017, partial surrenders are carried out according to the LIFO method (last in, first out). For policies sold after May 14, 2017, and Évoluvie policies (Quebec only), the FIFO method (first in, first out) applies.

DIVIDENDS

- I request withdrawal of my dividends on deposit: Amount of \$ _____
- I request the surrender of the paid-up insurance (Desjardins Insurance is hereby discharged from all liability under the policy in respect of the Bonus or Paid-Up Additions of which payment of cash value is requested, other than such payment.)
- I request that future dividends be changed to:
- Paid out in cash Used to reduce premiums Left on deposit to accumulate at interest Applied toward the loan

SPECIAL INSTRUCTIONS

Payment: Cheque sent to the financial centre Cheque sent to the Policyowner's residence
 Direct deposit (into the account we have on file; otherwise, provide a void cheque)

X _____ Y | Y | M | M | D | D
 Signature of Policyowner 1 Social Insurance Number

X _____ **X** _____ Y | Y | M | M | D | D
 Signature of Policyowner 2 Social Insurance Number Signature of witness DATE

I HAVE READ THIS AGREEMENT AND AGREE TO IT.

X _____ **X** _____ Y | Y | M | M | D | D
 Signature of irrevocable beneficiary Signature of witness DATE

X _____ **X** _____ Y | Y | M | M | D | D
 Signature of creditor who holds a guaranty on the contract Signature of witness DATE

 Title of creditor who holds a guaranty on the contract Telephone