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FORM 37 RIF Beneficiary Designation / Change Form			
Your ACCOUNT NUMBER			
4501			

Please be sure to sign and date before returning the completed form to AFBS. Completed forms may be scanned and emailed, faxed or mailed to AFBS. If you have any questions concerning this form, please contact AFBS or your professional advisors. Please retain a copy of the signed form in your personal files.

SECTION 1 - Planholder Information (please print)			
NAME (Last, First, Middle Initial)	DATE OF BIRTH	TELEPHONE NUMBER	
	DD MM YYYY	( ) -	
For Members of AFBS, please provide your Guild Number and Legal Name (if different than Name above).			
GUILD NUMBER LEGAL NAME (Last, First, Middle Initial)			
SECTION 2 - Planholder Information and Declaration			
(Please use separate forms if you wish to designate different beneficiaries for different plans.) I, the undersigned, do hereby revoke any prior			
designation of beneficiary made in respect of the benefits indicated. I do declare and direct that any proceeds from these benefits be paid to			
the beneficiary named below in the event of my death, if permitted by law. I understand that this designation will apply to all plan(s) under			
which I may be eligible for death benefits should I fail to specify the applicable plan(s) here.			
IMPORTANT SPECIAL NOTE - Québec Residents Only			
Under Québec legislation, the irrevocable beneficiary rule does not apply to a common-law spouse. If you have designated your legal spouse			
as beneficiary, that designation will automatically become irrevocable unless you indicate by initialing in the space provided that you wish			
to have the right to change your beneficiary in the future.			
Initial			
SECTION 3 - Beneficiary Information (see page 3 for explanations)			
If you are appointing more than two beneficiaries or multiple and contingent beneficiaries, please include a signed and dated separate letter			
which outlines your designations.			
Primary (100%) or Joint Primary Beneficiary%			
NAME (I set First Middle Initial)	AME (Last, First, Middle Initial) RELATIONSHIP		
IVANIE (Last, 1 113t, muone initiat)			
STREET ADDRESS			
CITY	PROVINCE	OSTAL CODE	



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## **FORM 37** RIF Beneficiary Designation / Change Form

SECTION 4 If you are appointing more than two beneficiaries or multiple and contingent beneficiaries, please include a signed and dated separate letter which outlines your designations. Joint Primary Beneficiary - \_\_\_\_\_\_\_% or Contingent Primary NAME (Last, First, Middle Initial) RELATIONSHIP STREET ADDRESS PROVINCE POSTAL CODE CITY SECTION 5 - Declaration Appointing Trustee for a Minor Beneficiary NOTE: If any beneficiary is a minor, you may wish to complete the following. In some provinces your spouse is not automatically the trustee for your minor children. The age of majority is not standardized and you may wish to verify the age of majority in the province in which the minor child resides. NAME (Last, First, Middle Initial) RELATIONSHIP STREET ADDRESS CITY PROVINCE POSTAL CODE SECTION 6 - Special Instructions **SECTION 7 - Authorization** I reserve the right to change this designation of beneficiary, unless prohibited by law. A photocopy or facsimile of this designation shall be as valid as the original. PLANHOLDER'S SIGNATURE (required) DATE

Please see the Important information about the AFBS RIF Beneficiary Designation/Change Form for additional details. This form is a legal document and it is imperative that your designation is complete and reflects your wishes.



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## RIF Beneficiary Designation / Change Form

## Important Information about the AFBS Beneficiary Designation/Change Form

- 1. Your Account Number is shown on your Member Statement issued by AFBS. This is a unique identifier, used only by AFBS and by which we manage your financial accounts.
- 2. If you wish to name your estate as beneficiary, please indicate "ESTATE" on the beneficiary name line in Section 3. The designation will default to the "ESTATE" when a beneficiary has not been appointed.
- 3. If you wish to name more than one beneficiary, or a Contingent Beneficiary, please use the space provided in Sections 3 and 4.
- 4. If your beneficiary is a minor child, please also complete Section 5 Declaration Appointing a Trustee for a Minor Beneficiary.
- 5. The "Special Instructions" section is for your use if you list more than one beneficiary and additional details are required concerning the disposition of funds.

A separate, signed and dated letter may be included.

For Planholders in all provinces except Québec, the designation of a beneficiary is revocable unless otherwise stipulated.

For Planholders who reside in the Province of Québec, the designation of a legal spouse is irrevocable unless otherwise stipulated or if prevented by law. In the case of any other beneficiary, the designation is revocable unless otherwise stipulated.

## **TERMINOLOGY**

"Spouse" (legal or common-law), is defined as a person who is living with you in a conjugal relationship. "Common-law Spouse" means a person of the same or opposite sex who is publicly represented as being your spouse and who has been living with you continuously for at least the last two (2) years except where otherwise required by provincial legislation. Within Québec beneficiary designation statutes differentiate between the legal and common-law spouse definition. See the definition listed under "IMPORTANT SPECIAL NOTE for Québec residents only" on the Beneficiary Designation/Change Form.

Most individuals designate one person as their beneficiary (Primary Beneficiary) and may appoint a Contingent Beneficiary to address the situation where the Primary Beneficiary predeceases the insured/planholder. When it is appropriate to have more than one beneficiary you may use this form or alternately specify that proceeds are payable to your Estate and address any distribution within your Will. Please speak with your legal advisor as to which approach best suits your interests. When Joint Primary Beneficiaries and Contingent Beneficiary(ies) are designated, it is IMPORTANT that you specify the rights of each Beneficiary(ies) in the Special Instructions.

**Primary Beneficiary** - when only one person is appointed to receive the proceeds of the benefits indicated.

Joint Primary Beneficiary - when two or more people are appointed to receive the proceeds of the benefits indicated.

The intended proceeds of a Joint Primary Beneficiary who predeceases you will be payable to your Estate unless a Contingent Beneficiary has been appointed or instructions to the contrary are included in the Special Instructions (i.e. payable to the remaining Joint Primary Beneficiary).

Contingent Beneficiary - the individual(s) who will receive the proceeds of the benefits indicated should the named Primary Beneficiary or Joint Primary Beneficiaries either predecease you or do not survive you for a specified number of days.

The Contingent Beneficiary will receive the proceeds of the benefits indicated if the Primary Beneficiary predeceases you. Where there are Joint Primary Beneficiaries, please specify the circumstances under which the Contingent Beneficiary is eligible to receive benefits. (i.e. Upon the death of the Joint Primary Beneficiary or all Joint Primary Beneficiaries.)

If you have any questions concerning this form, please contact AFBS or your professional advisors.