

29

Witness to all signatures

Appendix B

Sun Life Assurance Company of Canada Request for Change to Adjustable Life Policy

Re: Policy No. 30 on the Life of 31

Review of Policy Cost Basis

Signed at____

Review Date: 32 (see Adjustment Provision in your policy.)

I understand that the cost basis of my policy for the three-year period beginning on the above review date will be higher than the one in effect for the past three years.

In lieu of my premium payment being increased, Sun Life is hereby directed to maintain my current premium payment and reduce the amount of the Adjustable Life Benefit to the amount appropriate for the premium payment. I understand that the cash and paid-up values for the policy will be those appropriate for the amount of the premium being paid.

I confirm that this election will apply at all future review dates should a higher cost basis be established.

Amount of Adjustable Life Benefit if current Premium Payment is maintained: 33

As elected, there will be no change in the premium and the amount of the premium will continue to be 34 35, until the next review date. Cash and Paid-up Values on 36 assuming all previous premiums are paid are as follows:

| | Cash Value | Paid-up Value |
|--------------|----------------|---------------------------|
| 37 | 38 | 39 |
| 40 | 41 | 42 |
| 43 | 44 | 45 |
| 46 | 47 | 48 |
| See Cash and | Paid-up Values | Provision in your policy. |
| Signature | | |
| Owner | | |
| | | |

RETURN TO SUM LIFE

on 19 In the presence of