

Disqualification of partner



Please PRINT clearly. Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies, is committed to keeping your information confidential.

1 Plan member details

Contract number	Plan member ID	Contract holder name
Plan member's last name		First name
Name of person presently qualifying as spouse		

2 Authorization and signature

I, the undersigned do hereby elect to disqualify the above person as my spouse as provided in the contract, under (a) or (b) below:

- (a) The person presently qualifying as my spouse is my spouse by marriage. I hereby warrant that:
- I am separated from this person by a virtue of a judgment of a court of competent jurisdiction or of an enforceable written contract.
 - I am legally divorced from this person.

I understand that the strict accuracy of this information is a condition to my right to disqualify such partner as my spouse under the contract.

Plan member's signature X	Date (yyyy-mm-dd) - -
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- (b) The person presently qualifying as my spouse is a partner who is publicly represented as my spouse. I hereby warrant that I am no longer publicly representing this person as my spouse.

I understand that the strict accuracy of this information is a condition to my right to disqualify such partner as my spouse under the contract.

Plan member's signature X	Date (yyyy-mm-dd) - -
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