



**INFORMATION ABOUT THE PLAN**

 Certificate 

--	--	--	--	--	--	--	--	--	--

**Contractholder**  
 SKIPWITH & ASSOCIATES INSURANCE AGENCY
 

Contrat no.	Division
4   0   5   5   0	0   0   1

 Are the requested changes also applicable to other divisions?:  Yes  No : Which ones ? \_\_\_\_\_

**INFORMATION ABOUT THE MEMBER**

Last name \_\_\_\_\_ First name \_\_\_\_\_

 Social Insurance Number 

--	--	--	--	--	--	--	--	--	--

**CHANGE OR REQUEST FOR PRE-AUTHORIZED PAYMENTS (IMPORTANT : ATTACH A SPECIMEN CHEQUE)**
**For your account**
**For your spouse's account**

I authorize Industrial Alliance Insurance and Financial Services Inc. to draw a cheque on my bank account according to the following instructions:

I authorize Industrial Alliance Insurance and Financial Services Inc. to draw a cheque on my bank account according to the following instructions:

 Amount (minimum \$25): \$ 

--	--	--	--	--	--	--	--	--	--

 Amount (minimum \$25): \$ 

--	--	--	--	--	--	--	--	--	--

 Starting 

--	--	--	--	--	--	--	--	--	--

 Starting 

--	--	--	--	--	--	--	--	--	--

 Frequency  Monthly  Every two weeks  Weekly  
 Day (1 to 28) \_\_\_\_\_  
 Day (Monday to Friday) \_\_\_\_\_  
 Day (Monday to Friday) \_\_\_\_\_

 Frequency  Monthly  Every two weeks  Weekly  
 Day (1 to 28) \_\_\_\_\_  
 Day (Monday to Friday) \_\_\_\_\_  
 Day (Monday to Friday) \_\_\_\_\_

I authorize Industrial Alliance Insurance and Financial Services Inc. to exchange personal information with the financial institution in order to execute this agreement. Transaction fees may be charged for any cheque that is not honoured by my financial institution.

I authorize Industrial Alliance Insurance and Financial Services Inc. to exchange personal information with the financial institution in order to execute this agreement. Transaction fees may be charged for any cheque that is not honoured by my financial institution.

 Signature \_\_\_\_\_  
 Other signature if joint account \_\_\_\_\_

 Signature \_\_\_\_\_  
 Other signature if joint account \_\_\_\_\_

**SIGNATURE**

Member's signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's signature if change affect the spouse's account \_\_\_\_\_ Date \_\_\_\_\_

**INFORMATION ABOUT THE PLAN**

Certificate 

--	--	--	--	--	--	--	--	--	--

**Contractholder**  
SKIPWITH & ASSOCIATES INSURANCE AGENCY

Contrat no.	Division
4   0   5   5   0	0   0   1

**INFORMATION ABOUT THE MEMBER**

Last name \_\_\_\_\_ First name \_\_\_\_\_

Social Insurance Number 

--	--	--	--	--	--	--	--	--	--

**CHANGE IN INVESTMENT INSTRUCTIONS AND/OR IN EXISTING INVESTMENTS**

**TURNKEY SOLUTION AND TAILOR-MADE SOLUTION**

You must choose among the investment options from the solutions below. We suggest that you complete the "Your Investor Profile" questionnaire in order to make an informed choice.

Turnkey Solution

Choose from a variety of investment options from the Turnkey Solution and let our fund managers work for you.

Tailor-made Solution

Choose from a variety of funds that are offered on an individual basis in order to create a personalized portfolio all your own.

If you do not provide investment instructions or if they do not total 100%, no changes will be made to your investment instructions.

The Asset Allocation Funds are made up of Industrial Alliance Insurance and Financial Services Inc. investment funds.

You must complete section 1.

1 - The modifications to the investment instructions or composition of existing investments apply to the following accounts (you can check off more than one box):

- Member's account - All contributions (Important: do not check off the options below if you check this one off)
- Member's account - Regular contributions
- Member's account - Voluntary contributions
- Member's account - Employer contributions
- Spouse's account

Note : Unless you provide notice to the contrary, any modifications on this request will apply to all contributions for which you control the investment instructions. Please attach a separate request, date it and sign it if you wish to make specific changes according to the various sources of contributions.

2- Please complete at least one of columns A, B or C in the table below depending on what you want to do:

- Complete column A if you want to modify your investment instructions for future contributions.
- Complete column B if you want to modify your investment instructions for a special contribution (including a transfer).
- Complete column C if you want to modify the composition of existing investments.

You must make sure that the total percentage of each investment instruction below is equal to 100%.

INVESTMENT OPTIONS	No.	Column A Future contributions	Column B Special contribution	Column C Composition of existing investments	
		Instructions (in percent)	Instructions (in percent)	Investment to be redeemed \$ <input type="text"/> or <input type="text"/> %	Reinvest as follows \$ <input type="text"/> or <input type="text"/> %
<b>TURNKEY SOLUTION</b>					
Asset Allocation Funds					
Asset Allocation - Conservative	FU506	%	%		
Asset Allocation - Moderate	FU507	%	%		
Asset Allocation - Balanced	FU508	%	%		
Asset Allocation - Growth	FU509	%	%		
Asset Allocation - Aggressive Growth	FU510	%	%		
<b>TAILOR-MADE SOLUTION</b>					
Income Funds					
Money Market	FU070	%	%		
Short Term Bonds	FU170	%	%		
Bonds	FU020	%	%		
Bonds (Beutel Goodman)	FU750	%	%		
Bonds (PIMCO)	FU860	%	%		
Bonds (Fiera Capital)	FU472	%	%		
Bonds (PH&N)	FU521	%	%		
Emerald Canadian Bond Index (TD)	FU489	%	%		
Long Term Bonds	FU504	%	%		
Long Term Bonds (PIMCO)	FU861	%	%		

PLEASE RETURN THIS COMPLETED AND SIGNED FORM TO THE ADDRESS MENTIONED AT THE TOP OF THIS PAGE. MOREOVER, IF YOU REQUESTED THAT CONTRIBUTIONS BE DEDUCTED FROM YOUR SALARY, PLEASE ADVISE YOUR PLAN SPONSOR.

**INFORMATION ABOUT THE PLAN**

 Certificate 

--	--	--	--	--	--	--	--	--	--

**Contractholder**

SKIPWITH &amp; ASSOCIATES INSURANCE AGENCY

Contrat no.

4	0	5	5	0
---	---	---	---	---

Division

0	0	1
---	---	---

**INFORMATION ABOUT THE MEMBER**

Social Insurance Number

--	--	--	--	--	--	--	--	--	--	--

**CHANGE IN INVESTMENT INSTRUCTIONS AND/OR IN EXISTING INVESTMENTS (continued)**

INVESTMENT OPTIONS (continued)	No.	Column A Future contributions	Column B Special contribution	Column C Composition of existing investments	
		Instructions (in percent)	Instructions (in percent)	Investment to be redeemed	Reinvest as follows
<b>Diversified Funds</b>					
Diversified Security	FU240	%	%		
Diversified	FU040	%	%		
Diversified (Jarislowsky)	FU463	%	%		
Diversified (MFS McLean)	FU380	%	%		
Balanced (PH&N)	FU522	%	%		
Diversified (Beutel Goodman)	FU751	%	%		
Diversified Opportunity	FU250	%	%		
Fidelity Canadian Asset Allocation	FU462	%	%		
<b>Canadian Equity Funds</b>					
Dividends	FU160	%	%		
Canadian Equity Index (TD)	FU753	%	%		
Canadian Equity Value	FU010	%	%		
100% Canadian Equity Value	FU494	%	%		
Canadian Equity (Jarislowsky)	FU488	%	%		
Canadian Equity (Scheer Rowlett)	FU543	%	%		
Canadian Equity (Highstreet)	FU835	%	%		
Canadian Equity (Invesco)	FU487	%	%		
Canadian Focused Equity (Pyramis)	FU871	%	%		
Canadian Equity (Pyramis)	FU862	%	%		
Canadian Equity (Beutel Goodman)	FU752	%	%		
Canadian Equity Growth	FU464	%	%		
Canadian Equity (MFS McLean)	FU360	%	%		
Canadian Equity (Fiera Capital)	FU473	%	%		
FidelityTrue North R	FU270	%	%		
Cdn Equity (Small Cap.) (Montrusco)	FU511	%	%		
Canadian Equity (Small Cap.) (QV)	FU541	%	%		
Cdn Equity Responsible (MFS McLean)	FU514	%	%		
<b>Foreign Equity Funds</b>					
Global Equity	FU707	%	%		
Global Equity (Templeton)	FU465	%	%		
Global Equity (Sprucegrove)	FU754	%	%		
Global Equity (Artio)	FU837	%	%		
Global Equity (Hexavest)	FU500	%	%		
Global Equity (C\$-Hedged) (Hexavest)	FU865	%	%		
Global Dividends (BNP Paribas)	FU534	%	%		
Global Equity (MFS McLean)	FU390	%	%		
Global Equity (C\$-Hedged) (MFS McLean)	FU864	%	%		
Global Equity (Pyramis)	FU863	%	%		
Global Equity (Small Cap.) (DB Advisors)	FU531	%	%		
International Equity Index (BlackRock)	FU300	%	%		
International Equity	FU706	%	%		
International Equity (Templeton)	FU080	%	%		
International Equity (Sprucegrove)	FU755	%	%		
International Equity (Jarislowsky)	FU483	%	%		
International Equity (Artio)	FU838	%	%		
International Equity (Hexavest)	FU852	%	%		
International Equity (MFS McLean)	FU467	%	%		

PLEASE RETURN THIS COMPLETED AND SIGNED FORM TO THE ADDRESS MENTIONED AT THE TOP OF THIS PAGE. MOREOVER, IF YOU REQUESTED THAT CONTRIBUTIONS BE DEDUCTED FROM YOUR SALARY, PLEASE ADVISE YOUR PLAN SPONSOR.

**INFORMATION ABOUT THE PLAN**

 Certificate 

--	--	--	--	--	--	--	--	--	--

**Contractholder**

SKIPWITH &amp; ASSOCIATES INSURANCE AGENCY

Contrat no.

4	0	5	5	0
---	---	---	---	---

Division

0	0	1
---	---	---

**INFORMATION ABOUT THE MEMBER**

Social Insurance Number

--	--	--	--	--	--	--	--	--	--

**CHANGE IN INVESTMENT INSTRUCTIONS AND/OR IN EXISTING INVESTMENTS (continued)**

INVESTMENT OPTIONS (continued)	No.	Column A Future contributions	Column B Special contribution	Column C Composition of existing investments	
		Instructions (in percent)	Instructions (in percent)	Investment to be redeemed	Reinvest as follows
U.S. Equity Index (BlackRock)	FU760	%	%		
U.S. Equity	FU705	%	%		
U.S. Equity (Batterymarch)	FU839	%	%		
U.S. Equity (Sprucegrove)	FU756	%	%		
U.S. Equity (Jarislowsky)	FU512	%	%		
U.S. Equity (MFS McLean)	FU513	%	%		
Global Real Estate (BNP Paribas)	FU540	%	%		
<b>Guaranteed Income Investments</b>					
1 year guaranteed investments	PLGAR	%	%		
2 year guaranteed investments	PLGAR	%	%		
3 year guaranteed investments	PLGAR	%	%		
4 year guaranteed investments	PLGAR	%	%		
5 year guaranteed investments	PLGAR	%	%		
6 year guaranteed investments	PLGAR	%	%		
7 year guaranteed investments	PLGAR	%	%		
8 year guaranteed investments	PLGAR	%	%		
9 year guaranteed investments	PLGAR	%	%		
10 year guaranteed investments	PLGAR	%	%		
<b>Total</b>		<b>100.00 %</b>	<b>100.00 %</b>		<b>100.00 %</b>

It is understood that the performance of the sums invested in the investment funds is not guaranteed.

**REINVESTMENT OF GUARANTEED INVESTMENTS AT MATURITY**

If your investments contain guaranteed investments, please indicate how you want the capital and interest to be reinvested at maturity:

- In guaranteed investments (whose term is the same as that of the original investments)  
 According to current investment instructions

If no choice is made, the sums will be reinvested according to current investment instructions.

**SIGNATURE**

I certify that I have read the information that appears on the Your Range of Investment Options brochure and the information concerning investment funds, or that I have at least been informed as to how to obtain the said information by consulting the documentation from Industrial Alliance Insurance and Financial Services Inc. I also certify that I have been informed about guaranteed investments and the applicable interest rates, or that I have at least been informed as to how to obtain the said information.

Member's signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's signature (if contributions under the spouse's name) : \_\_\_\_\_ Date \_\_\_\_\_