

Beneficiary Change Form

Please complete and send this form to: I.A.M. Multi-Employer Pension Fund (Canada) 116 Lisgar Street, Suite 204, Ottawa, Ontario K2P 0C2

Personal Information of Plan Member			
S.I.N			
Name:			
Last	First	Middle	
Beneficiary Designation (Please see General Information below on naming beneficiary.)			
Note: This designation revokes any previous beneficiary des	signation the Trustees ma	y have on file.	
Name:	First	Middle	
Address		MIGGIO	
Address:Street	City/Town	Province	Postal Code
Relationship to you:		% of Benefit:	
Please attach a separate sheet if you wish to designate more than one beneficiary.			
Name:			
Last F	irst	Middle	
Address:			
Street	City/Town	Province	Postal Code
Relationship to you:		% of Benefit:	
Please attach a separate sheet if you wish to designate more than one beneficiary.			
Name:			
	First	Middle	
Address:Street	City/Town	Province	Postal Code
	•		
Relationship to you: % of Benefit:			
Please attach a separate sheet if you wish to designate more than one beneficiary.			
Percentages must total 100%			
Plan Member Declaration and Authorization			
	rate and complete. Lauthor	ing the collection and use of all inform	ation contained in this
I certify that the information I have provided on this form is acculform, and any additional personal information which I may herea			
their designated agents and advisors, including the use of social insurance number for identification, administration and tax reporting purposes. I also			
authorize the collection, retention, disclosure and sharing of my personal information by the Trustees and their designated agents, advisors and service providers as may be required to administer the Plan including but not limited to determining eligibility for benefits, processing and paying benefits and			
on-going financial management of the Plan including cost analys	is and internal audits. I und	derstand that I may withdraw all or part	of my consent at any
time, in writing, but that doing so may interfere with the administration of the Plan and any benefits that may be payable to me. I understand that for more information on how the Fund Office ensures my information is protected, I can refer to the Fund's Privacy Note to Members.			
more information on now the Fund Office ensures my information	ris protected, i carrierer to	THE FUTILIS FITVACY NOTE TO INTERTIDETS.	
Signature of Plan Member		Date	
Signature of Witness (Anyone over age 18 and not a beneficiary)	1	Date	
Name of Witness (Print)			
Address of Witness – No. and Street	City/Town	Province	Postal Code

General Information on Naming Beneficiary or Beneficiaries

The beneficiary designation applies only if you die before retirement and you do not have an eligible spouse at the time of your death. If you have an eligible spouse, he or she is entitled to any survivor benefits that may be payable under the Plan.

Your beneficiary can be a person(s), organization or your estate. You can change your beneficiary at any time by completing and submitting another *Beneficiary Change Form* to the Fund Office. Your designation is not valid until this form is received by the Fund Office.

If you have an eligible spouse and you also designate a beneficiary, should your spouse die before you, your designated beneficiary is the person who would receive the death benefit, if any death benefit is payable after your death.

General Information on Naming Your Child As A Beneficiary

Someone under the age of 18 (known legally as a minor) cannot directly receive survivor benefits. However, you can still ensure that a minor is eligible for any survivor benefits payable upon your death in two ways:

- □ List your "Estate" as your beneficiary in the Designated Beneficiary section. In your will, you must direct that your I.A.M. Multi-Employer Pension Plan (Canada) Death Benefits go to the minor. You must also name a Trustee for the child
- List the minor as your beneficiary and designate a Trustee for the child in your will.

You should not name a Trustee as your beneficiary. If you name a Trustee as your beneficiary, any survivor benefits will go to that individual, who will be legally entitled to spend the money.

The Fund Office recommends that you get independent legal advice to ensure your will accurately reflects your wishes.

Please note that the General Information provided above does not cover all details of the Plan. The official Plan document governs in the event of a conflict, discrepancy or omission.