



DIVIDEND REQUEST FORM

COMPLETE A SEPARATE FORM FOR EACH POLICY – ONLY THE POLICY OWNER CAN MAKE THIS REQUEST

Name of Insured _____ Policy Number _____ Date _____

Note: Withdrawal and Application Requests must balance

SECTION A REQUEST TO WITHDRAW PAID UP ADDITIONS OR ACCUMULATED DIVIDENDS			
<i>Withdrawal Request</i>		<i>AMOUNT</i>	
Dividend Accumulations			
Cash value of Paid-up Additions			
TOTAL			
<i>Application Request</i>		<i>AMOUNT</i>	
Apply to premium for policy no.			
Apply to new application no.			
Apply to loan of policy no.			
Send cheque for requested amount.			
TOTAL			

I UNDERSTAND THAT:

1. Dividend accumulations which have been withdrawn may not be redeposited.
2. If the dividends have purchased paid-up additions:
 - (a) The additions have been purchased on a net cost basis, and
 - (b) These additions have been eligible to participate in future earnings of the Society, and
 - (c) These additions are hereby cancelled and may not be reinstated.
3. By withdrawing dividend accumulations or cash value of paid-up additions, the amount of proceeds available for loan purposes or at death, maturity, or surrender will be reduced, except for the face amount of the policy and the values guaranteed with respect to that loan amount.

SECTION B DIVIDEND OPTIONS (Please check one)	
<input type="checkbox"/> OPTION 2	Apply to Premium (excess paid by cheque to the policy owner)
<input type="checkbox"/> OPTION 3	Purchase Paid-Up Additional Insurance
<input type="checkbox"/> OPTION 4	Accumulate with Interest
<input type="checkbox"/> OPTION 6	Apply to Loan (excess left to accumulate with interest)
<input type="checkbox"/> Transfer of Accumulated Dividends to Purchase Paid-up Additions	Note: If accumulated dividend cash value is \$5,000 or more, a <i>Statement of Continued Insurability</i> will be required.

SECTION C REQUEST FOR PREMIUM OFFSET PROVISION
<input type="checkbox"/> I elect the Premium Offset Provision – Premium frequency will be automatically changed to annual, if it is not already at this selection. Dividend Option is restricted to Option 3 or 4 as stated above. I also understand that at some future date I may be required to pay premiums in cash because this Premium Offset Provision is based on future dividends, which are not guaranteed.

Dated At _____ Owner's Signature _____ Signature of Beneficiary (if Preferred) _____

Address of Owner		For FaithLife Financial Use Only	
Name	_____	Processed By:	_____
Address	_____	Date Processed:	_____
City / Prov	_____		
Postal Code	_____		