

The Great-West Life Assurance Company (Great-West) provides services for the group retirement plans and policies issued by The London Life Insurance Company, a subsidiary of Great-West.

To be completed by a plan member wishing to consolidate assets under a current and a prior certificate.

**Please print.**

**MEMBER INFORMATION:**

Last name	Initial	First name	Social insurance number
_____	_____	_____	____ - ____ - ____

I hereby request the transfer of assets:

**FROM MY PRIOR CERTIFICATE:**

Policy/plan # \_\_\_\_\_ Employer/Plan sponsor name \_\_\_\_\_

Subgroup #: \_\_\_\_\_ Certificate # \_\_\_\_\_

**TO MY CURRENT CERTIFICATE:**

Policy/plan # \_\_\_\_\_ Employer/Plan sponsor name \_\_\_\_\_

Subgroup #: \_\_\_\_\_ Certificate # \_\_\_\_\_

I understand that the plan provisions of my current certificate will apply to my transferred assets. I also understand that any investment instructions applicable to maturing guaranteed investments and the beneficiary designation under my current plan will also apply to the transferred assets.

**IMPORTANT – delete this highlighted section from the table as well as one of the options below, as appropriate for your situation – the 2<sup>nd</sup> option is applicable if the member is invested in funds in the prior certificate that are not all available under the current certificate, which could include GIC's.**

**Investment direction for transferred assets:**

- Assets to be invested in the same funds as they are currently invested  
*NOTE: existing guaranteed investments will be disinvested and deposited for a new rate and term under the current certificate.*
- Assets to be invested according to my current investment allocation instructions, under my current certificate. *NOTE: existing guaranteed investments will be disinvested and redeposited according to your current investment allocation instructions.*

Transferred assets will be invested according to the current investment allocation instructions, under the current certificate, unless alternate investment instructions are submitted with this form.

Signature of member \_\_\_\_\_ Date \_\_\_\_\_