



SunWise® Elite Including SunWise® Elite Plus
Segregated Funds Order Ticket
(existing clients only)



managed by CI Investments Inc.

issued by Sun Life Assurance Company of Canada

Owner's Last Name _____ Owner's First Name _____
 Joint Owner's Last Name _____ Joint Owner's First Name _____ Contract Number _____

1 Purchase and Redemption Trade Direction

(Including for SunWise Elite Private Managed Assets Program (PMA)*)

*If purchase into new sub-account, please attach the SunWise Elite PMA Program Enrolment Form.

- Cheque attached Subsequent purchase into Contract noted above (same Class of Funds)
 T2033/T2151 attached Purchase in a new sub-account Class B Class C
 Bank deposit Redemption of units

(Do not use to make an initial contribution to SWE Plus (GMWB))

FUND NAME	FUND CODE	PREMIUM AMOUNT (\$ OR % PLEASE CHECK ONE)	FRONT-END FEE	PAC* AMOUNT	AWD** AMOUNT	WIRE ORDER NUMBER
		<input type="checkbox"/> \$ <input type="checkbox"/> %	%	\$		
		<input type="checkbox"/> \$ <input type="checkbox"/> %	%	\$		
		<input type="checkbox"/> \$ <input type="checkbox"/> %	%	\$		
		<input type="checkbox"/> \$ <input type="checkbox"/> %	%	\$		

* Pre-authorized chequing - PAC

** Automatic Withdrawal - AWD

PAC Plan Start Date: Y | M | D AWD Plan Start Date: Y | M | D Frequency: Weekly Bi-weekly Monthly Bi-monthly
 Quarterly Semi-Annually Annually

Please send redemption cheque to: Address on file Mail to financial institution on file Deposit directly into bank account on file

Special Instructions : _____

2 Please Complete for Switches Only

Including for switches to existing SunWise Elite Plus (GMWB Rider*), SunWise Elite Private Managed Assets Program (PMA**)

*The SunWise Elite Plus units trade under the corresponding fund codes with the addition of a P at the end of the code.

**If transfer into a new Class PMA sub-account, please attach the SunWise Elite PMA Program Enrolment Form.

PREMIUM AMOUNT (\$ OR % PLEASE CHECK ONE)	FROM: FUND NAME	FUND CODE	TO: FUND NAME	FUND CODE	WIRE ORDER NUMBER
<input type="checkbox"/> \$ <input type="checkbox"/> %					
<input type="checkbox"/> \$ <input type="checkbox"/> %					
<input type="checkbox"/> \$ <input type="checkbox"/> %					
<input type="checkbox"/> \$ <input type="checkbox"/> %					

Switch/Transfer fee % up to 2% Switch fees of up to 2% are not permitted within SunWise Elite Plus (GMWB) policies.

Transfer existing PAC/AWD plan to the new fund Continue existing PAC/AWD plan on the current fund Stop PAC/AWD plan.

If no option is elected, CI will move the PAC/AWD to the new fund for full switches and continue PAC/AWD on the current fund for partial switches.

3 To initiate RRIF /LIF /LRIF /PRIF and GMWB Payments for SunWise Elite Including SunWise Elite Plus (GMWB)

a) RIF/LIF/LRIF/PRIF PAYMENTS (The payment date may be between the 1st and the 25th of any month)

- The minimum annual payment (MAP) requirement
 The maximum annual gross amount (for LIF/LRIF only)*
 The annual Guaranteed Withdrawal Amount (GWA)
 An annual amount of \$ _____ Gross or _____ Net of fees and withholding taxes*

If no date or payment amount is indicated, CI will pay the RIF/LIF/LRIF/PRIF minimum during the month of December, and will redeem units proportionately across all Funds.

b) NON-REGISTERED PLANS

- The annual Guaranteed Withdrawal Amount (GWA)
 An annual amount of \$ _____ Gross or Net of fees*

*Withdrawals in excess of the annual GWA may have a negative impact on future guaranteed payments under the GMWB.

c) PAYMENT INSTRUCTIONS

Frequency (please choose only one): Monthly Quarterly Semi-Annually Annually Start date Y | M | D
 Deposit directly to bank account (please attach void cheque) Mail to Owner Mail to alternate address

Name	Address	City	Province	Postal Code	FUND NAME	FUND CODE	SURRENDER AMOUNT	OR	PERCENT
							\$		%
							\$		%
							\$		%
							\$		%

4 Client Authorization

For purchases, redemptions and transfers: I/We hereby authorize CI Investments to buy/sell and/or transfer units out of my/our Contracts in accordance with the instructions set out above. All redemptions and scheduled withdrawal plans must be signed by the Owner(s).

For Pre-Authorized Chequing Plans (PAC): By signing you confirm that you have read and agreed to the PAC Terms and Conditions on the back of this form.

_____ _____ Y | M | D
 Owner Signature Joint Owner Signature Date

_____ _____
 Authorized Representative (as per Limited Trading Authorization if applicable) Irrevocable Beneficiary Signature

5 Representative Information (to be completed by the representative)

Representative Name _____ Telephone Number _____ Representative Signature _____ Signature Guarantee Stamp (required for redemptions over \$25,000)
 Dealer Number _____ Representative Number _____

1. Any amount paid with the SunWise Elite & SunWise Elite Plus Order Ticket must be a cheque payable to: CI Investments Inc.
 2. When complete, please send the Head Office copy to: CI Investments Inc., Administration Office, 15 York Street, Second Floor, Toronto, Ontario, M5J 0A3 or at fax number 416-364-6299

Pre-Authorized Chequing Plans (PAC) Terms and Conditions

- **By signing this application, you hereby waive any pre-notification requirements as specified by section 15(a) and (b) of the Canadian Payments Association Rule H1 with regards to PACs.**
- If you have indicated on the application that you want to make regular deposits using a Pre-Authorized Chequing Plan (PAC), you authorize CI Investments Inc. (CI) on behalf of Sun Life to debit the bank account provided for the specified amount(s) and in the frequencies selected.
- If this is for your own personal investment, your debit will be considered a Personal Pre-authorized debit agreement (PAD) by Canadian Payments Association definition. If this is for business purposes, it will be considered a Business PAD. Monies transferred between CPA members will be considered a Funds Transfer PAD.
- You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAC agreement. To obtain more information on your recourse rights, you may contact your financial institution, CI or visit www.cdnpay.ca.
- You may change these instructions or cancel this plan at any time, subject to providing CI notice of at least 48 hours prior to the next PAC run date. To obtain a sample cancellation form, or for more information on your right to cancel a PAC agreement, you may contact your financial institution, CI or visit the Canadian Payments Association website at www.cdnpay.ca. You agree to release the financial institution and CI of all liability if the revocation is not respected, except in the case of gross negligence by the financial institution or CI.
- CI is authorized to accept changes to this agreement from your registered dealer or your financial advisor in accordance with the policies of that company, in accordance with the disclosure and authorization requirements of the CPA.
- You agree that the information in this form will be shared with the financial institution, insofar as the disclosure of this information is directly related to and necessary for the proper application of the rules applicable for PACs.
- You acknowledge and agree that you are fully liable for any charges incurred if the debits cannot be made due to insufficient funds or any other reason for which you may be held accountable.
- You confirm that all persons whose signatures are required to authorize transactions in the bank account provided have read and agreed to these terms and signed this application.