



Convenient Premium Payment Option

Electronic Funds Transfer System Agreement

Please attached a blank cheque marked “void”

Sun Life Assurance Company of Canada is authorized to make monthly withdrawals from the account indicated below, or any other account designated to Sun Life. The withdrawals will pay for the monthly premiums including taxes for the group policy issued by Sun Life to the group policyholder. The premium due will be the amount stated in the monthly premium statement mailed by Sun Life.

If any withdrawal is not honored within the grace period allowed for premium payments, this agreement and the insurance coverage detailed in the premium statement will end without further notice.

We will pay for any financial institution charges for handling withdrawals.

Group Policyholder Name		Policy Number and Subdivision	
Name on Employer's Cheque			
Name of Financial Institution	Account Number	Transit Number	
Address of Financial Institution			

Type of Account: Savings ___ Current ___ True Chequing ___ Other ___

Signature of Account Holders	Date
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