

## Beneficiary Designation

For Lifecheque insurance coverages in Quebec, use Lifecheque Beneficiary Designations for policies governed by Quebec law, NN1467E. For Lifecheque insurance coverages outside Quebec, use Direction to Pay, NN0999E. This form may be used to name a beneficiary as described in your contract and permitted by law.

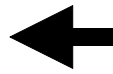
- We, us and our refer to the insurer of the policy identified below.
- You and your refer to the policy owner.
- See page 2 of this form for instructions on how to complete it.
- If you have any questions on how to complete this form, please contact your Manulife Financial representative or call our Valued Customer Centre at 1-888-626-8543 if you live outside Quebec or 1-888-626-8843 if you live in Quebec.
- If you are calling from outside of North America, please phone us collect at 519-747-6600.
- Send 2 copies of this form to Manulife Financial.

**Please send to:**

Manulife Financial  
Individual Insurance  
500 King Street North  
PO BOX 1669  
WATERLOO ON N2J 4Z6

OWNER'S  
NAME

ADDRESS



For return mail.  
Please print owner's name and address.

An *insured person* is a person who is insured under the policy or any rider.  
For annuity/investment contracts, the insured person is the *annuitant*.

<b>1 General information</b> Please provide a new beneficiary designation. Any previous beneficiary designation will be revoked, so the primary beneficiary should be restated. The information shown in sections 2 and 3 below, will replace any previous beneficiary designation.	Policy number(s)		Certificate number if group policy		
	Name of insured person/annuitant (first, middle initial, last)				
	Branch code	Representative's name		Representative's code	
<b>2 Primary and secondary beneficiary designation</b>  Beneficiaries (other than a spouse under a Quebec policy) will be revocable unless you specifically indicate that they are irrevocable by writing the word "irrevocable" after that beneficiary's name.  If you have an <b>irrevocable</b> beneficiary your rights in the policy will be limited. The beneficiary will have to give written consent before you can: <ul style="list-style-type: none"> <li>• change this designation;</li> <li>• withdraw funds;</li> <li>• assign the contract;</li> <li>• transfer ownership; or</li> <li>• otherwise change your policy (e.g., increase coverage).</li> </ul> Note that minor children cannot give written consent to these changes.  For policies <b>in Quebec</b> , if you have named your spouse as a beneficiary, the designation is irrevocable unless you select <input type="radio"/> <b>Revocable</b> .	<b>Primary beneficiary name(s)</b> (first, middle initial, last)		<b>Relationship to insured person</b> (in Quebec, relationship to owner)	<b>Share</b>	
				%	
				%	
				%	
				%	
				%	
				Total 100%	
	<b>Secondary beneficiary name(s)</b> (first, middle initial, last)		<b>Relationship to insured person</b> (in Quebec, relationship to owner)	<b>Share</b>	
				%	
				%	
			%		
			Total 100%		
A secondary beneficiary receives a death benefit only if no primary beneficiaries are alive when the insured person dies or if all primary beneficiaries are disqualified.					
<b>3 Signatures</b>  If the policy owner is a corporation, we require the signatures and titles of two signing officers, or the signature and title of one signing officer and the corporate seal.  The current beneficiary must sign the form to agree to the beneficiary change and to release his or her interest as a beneficiary if he or she is: <ul style="list-style-type: none"> <li>• an irrevocable beneficiary, or</li> <li>• a preferred beneficiary and the new beneficiary is not preferred.</li> </ul>	The provisions on page 2 of this form are also part of this beneficiary designation.				
	By signing below, I:				
	<ul style="list-style-type: none"> <li>• revoke any beneficiary designation or direction of payment that was previously made with respect to the proceeds payable on the death of the insured person or annuitant under the above policy or policies, and</li> <li>• direct that those proceeds be paid to the beneficiary or beneficiaries shown above.</li> </ul>				
	Signed at (location)		Date (dd/mmm/yyyy)		
	Signature of owner (title, if applicable)		Signature of witness (other than beneficiary)		
Signature of owner (title, if applicable)		Signature of witness (other than beneficiary)			
By signing here, I consent to the above change in the beneficiary designation for the above policy(ies) and relinquish my rights as a beneficiary.		Signature of irrevocable or preferred beneficiary, if applicable			

<b>Instructions for completion</b>	<p>This form provides for two classes of beneficiary - primary and secondary. It is not necessary to designate a secondary beneficiary.</p> <p>When completing a beneficiary designation, you don't need to use phrases like "if living, otherwise," "share and share alike" or "equally" because these concepts are covered by how we pay the death benefit, as described in the <i>Payment to beneficiaries</i> section below. If you want the beneficiaries in a class to receive unequal shares of the death benefit, indicate the percentage share of the death benefit to be received beside each beneficiary.</p> <p>If any corrections are made on this form, you need to initial them to confirm that they are valid.</p>
<b>Payment to beneficiaries</b>	<p>Under one of the conditions specified below, we will pay the death benefit (in one lump sum or in installments) unless otherwise stated in the beneficiary designation or the applicable policy:</p> <ol style="list-style-type: none"><li>1) To any primary beneficiaries who are alive at the time the insured person dies; or</li><li>2) If no primary beneficiary is then alive, to any secondary beneficiaries who are then alive; or</li><li>3) If no beneficiary is then alive:<ol style="list-style-type: none"><li>a) To the estate of the last surviving beneficiary, provided he or she died after the insured person and the benefit is being paid in installments; otherwise</li><li>b) To the policy owner, if other than the insured person; otherwise</li><li>c) To the policy owner's estate.</li></ol></li></ol> <p>If a beneficiary is disqualified from receiving the death benefit for any reason, we will consider that person to have died for the purposes of the benefit payment.</p> <p>Beneficiaries in the same class (primary or secondary) will share equally in any death benefit payable to them unless you have specified otherwise. If a beneficiary dies before the benefit is payable, his or her share will be allocated equally among any surviving beneficiaries in the same class unless you have specified otherwise.</p>