



Designation / Change of Beneficiary for Life Insurance

Personnel number	Last name of insured	First name of insured
Name of policy holder City of Toronto	Insurance carrier MANULIFE FINANCIAL	Group policy number 39884

Designation of Beneficiary *(Please complete the Trustee Appointment section at the bottom for beneficiary under 18.)*

- Initial appointment
- Change of beneficiary - I revoke all previous designations of beneficiary to receive any amount due under the above described policy on my death

Note: The proceeds of your policy will be payable to your Estate if a beneficiary is not appointed.

I designate the following person(s) to receive any amount due under the above described policy on my death:

Last Name	First name	Relationship	%	Date of Birth - if under 18 Trustee Appointment is required
1.				
2.				
3.				

If any of the above beneficiaries predecease me, such beneficiary's share shall:

- revert to my estate be divided equally among my surviving beneficiaries

Address of Beneficiaries

I reserve the right to change the beneficiaries appointed above, subject to any statutory restrictions.

Signature of Insured: _____ Date: _____

Trustee Appointment

I revoke any previous trustee appointment and hereby appoint _____ as Trustee to receive any amount due to any beneficiary under 18 years of age and declare the receipt of such Trustee shall be a good discharge to the Insurance carrier for the amount so paid. And I do hereby authorize such a Trustee, at his/her discretion, to expend all or any portion of such amount and/or the income therefrom for the maintenance or education of such beneficiary.

Signed at _____ this _____ day of _____

Signature of Witness _____ Signature of Insured _____

The personal information on this form is collected under the authority of the *City of Toronto Act, 1997*; and Schedule A, of Chapter 71, and Article X, Schedule No. 2, of Chapter 227, of the Municipal Code. The information is used to enrol for life insurance coverage and/or change beneficiary. Questions about this collection can be directed to Supervisor, Benefits & Employee Services, telephone no. 416-392-8098, Metro Hall, 55 John Street, 13th floor, Toronto, ON, M5V 3C6.

Mail completed form to: Pension, Payroll & Employee Benefits Division, Benefits & Employee Services Section, Metro Hall, 13th floor