



EMPLOYEE BENEFITS DIVISION

PENSION SCHEME TERMINATION FORM

Pension Plan # _____ Client Name _____

TO: **GUARDIAN LIFE LIMITED**

This is to advise you that _____

Has terminated his/her service with _____

Effective _____ 20 _____

Authorized Signature _____

Title _____

Date _____

ELECTION OF WITHDRAWAL BENEFIT

In accordance with the benefits under the above Group Pension Plan, I hereby elect to:

OPTION 1	Purchase a deferred life annuity secured by my full entitlement commencing at my Normal Retirement Date (NRD).	
OPTION 2	Transfer my full entitlement to an approved superannuation fund or approved retirement scheme.	
OPTION 3	Refund of my Accumulated Basic and Voluntary Contributions and transfer the employer's portion to an approved superannuation fund or approved retirement scheme.	
OPTION 4	Refund of my Accumulated Basic and Voluntary Contributions and purchase a deferred annuity commencing at my NRD, equivalent to the employer's deemed contributions.	

Upon receipt of this benefit, I hereby release the Trustees from all liabilities to me under this said Pension Plan.

Dated at _____ on _____ 20 _____

Witness _____ Signature _____
(Usual signature of terminating employee)

Contribution to ----- \$ _____ -----

Interest to ----- \$ _____ -----

Total Benefit to ----- \$ _____ -----