



UNIT TRANSFER & REALLOCATION FORM

(For Multiple Fund Policies)

CS 121

TRANSFER REALLOCATION

³Name of Life Insured:

¹Policy #.....²TRN

Policy owner/Insured Person

Policy Mailing Address.....

E-mail address..... Tel. No.

I, the undersigned, hereby authorise Guardian Life Limited, to transfer units to the value of \$..... as outlined below. The charges to be deducted from the amount transferred before investment in the selected Fund is%.

Fund	No. of Units	Value of Units	Transfer From	Transfer to (Indicate %)
Stabilisation				
Money Market				
Equity				
Real Estate/Long Term Growth				
Foreign Currency Indexed				
Capital Growth (Applicable only to the Guardian Investor Plus)				
TOTAL				

- Confirmation of Transfer stating the new Unit allocation in the funds will be issued for all multiple fund policies.
- This facility to transfer units is not a contractual right for former Prime Life policies, and the company reserves the right to determine the amount transferred and the timing of the execution of the request.
- For former Prime Life policies, the waiting period and other conditions to be determined by the Company only apply if the switch is NOT in the Real Estate Fund.

REALLOCATION:

Further to the instructions outlined above, please reallocate future total investment premiums as follows with effect from _____ 20 _____.

[%] Equity [%] Stabilisation [%] Real Estate/Long Term Growth [%] Money Market [%] Foreign Currency Indexed

[%] Capital Growth

Signed atthis day of 20

.....
Signature of Policyowner/Insured Person Witness (Co. Rep./Notary Public/J.P.) (Please sign and print name)

I.D. Type I.D. No.

.....
Signature of Beneficiary/Assignee Witness(Co. Rep./Notary Public/J.P.) (Please sign and print name)