

C. P. 3000 Lévis (Québec) G6V 9X8 desjardinslifeinsurance.com/planmember Tel.: 1-800-263-1810

NOTICE OF CANCELLATION

NOTICE OF CANCELLATION - Section 64 of the Insurers Act for Quebec residents

As stated in the *Insurers Act*, you have 10 days from when you receive the insurer's letter of approval to cancel your enrollment in your group insurance plan's optional benefits and **get a full premium refund**. To cancel your optional benefits, you must complete and return this form to the insurer by the previously mentioned deadline.

Your premiums will be refunded either by the group insurance policyholder (for example, your employer, your association or your union) or, in some cases, by the insurer.

After the deadline, you may end your optional benefits at any time by contacting the policyholder, but no premiums will be refunded for the period prior to your request.

NOTICE OF CANCELLATION	
To: DESJARDINS INSURANCE	
Date:	(date you're sending this notice)
Under section 64 of the <i>Insurers Act</i> , I hereby cancel the following optional benefits under my group insurance plan:	
Benefit type(s) and coverage amount(s) requested:	
Member's name:	
Contract number:	
Certificate number:	
Signed at:	Member's signature:

Please send the original to Desjardins Insurance, C. P. 3000, Lévis (Québec) G6V 9X8 and keep a copy for your records.