

VOLUNTARY CONTRIBUTION CHANGE FORM

Western University

EMPLOYEE NUMBER:	DEPARTMENT:
LAST NAME:	FIRST NAME & INITIAL:

PLAN TYPE: Academic Administrative

ELECT VOLUNTARY CONTRIBUTIONS:

I hereby authorize and direct the University to withhold from each pay by payroll deduction a total voluntary contribution amount of _____% (up to 8%) of my pensionable earnings, subject to the limitations of the Income Tax Act, commencing with the month of _____, and continuing so long as I am a member of _____ MM/YYYY the Plan, or until discontinued or changed by me through written direction.

TO ENSURE CORRECT ALLOCATION OF FUNDS PLEASE COMPLETE THE DIRECTION OF INVESTMENTS ON THE BACK OF THIS FORM.

If an investment direction is not elected, 100% of your voluntary contributions will be directed to the Balanced Growth Fund. If an investment change form was submitted previously for your voluntary future contributions, the funds will be allocated as per the most recent submission.

OR

STOP VOLUNTARY CONTRIBUTIONS:

I hereby request that any voluntary contributions currently being deducted from my pay be discontinued starting with the month of _____.
MM / YYYY

SEE OVER

DIRECTION OF INVESTMENT: I hereby direct that contributions be invested in proportions as indicated below for my voluntary account. The direction of investments shall be in effect from the first day of the month coinciding with or next following the date of membership in the plan and shall remain in effect unless changed by a subsequent direction by me.

<p>You are responsible for allocating your contributions among fund options offered under the pension plan. Allocations are made in whole percentages, adding up to 100%. If you do not make an allocation, your contributions will be invested in the <u>Balanced Growth Fund</u>. For detailed explanations of each of these investment options please see the Annual Report at www.uwo.ca/humanresources/ under "Retirement Plans Information"</p>	
BALANCED INCOME	_____
BALANCED GROWTH	_____
DIVERSIFIED BOND	_____
DIVERSIFIED EQUITY	_____
MONEY MARKET	_____
TARGET DATE 2014	_____
TARGET DATE 2016	_____
TARGET DATE 2018	_____
CANADIAN BONDS	_____
LONG TERM BONDS	_____
CANADIAN EQUITY	_____
US EQUITY – HEDGED (\$CDN)	_____
US EQUITY – UNHEDGED (\$US)	_____
NON-NORTH AMERICAN EQUITY	_____
SOCIALLY RESPONSIBLE GLOBAL EQUITY	_____
Total	100%

I acknowledge that it is my responsibility to review my annual pension statement and inform Human Resources immediately in writing should my account be invested in a manner other than as directed.

SIGNATURE OF PLAN MEMBER

_____/_____/_____
YEAR/MONTH/DAY

Please send completed form to:
 Western University
 Human Resource Services
 5100 Support Services Building
 London, ON N6A 3K7

OFFICE USE ONLY
 Flagged: Date: _____ Entered: Date: _____ ID# _____ Verified: Date: _____
 yy/mm/dd Initials yy/mm/dd Initials yy/mm/dd