



## Politically Exposed Foreign Person

**THIS FORM IS APPLICABLE FOR UNIVERSAL LIFE AND NON-REGISTERED INVESTMENT PRODUCTS**

### PROPOSED OWNER 1

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Policy/Account No. (if available)

### PROPOSED OWNER 2

\_\_\_\_\_  
Name (Please print)

- |          |   | OWNER 1               | OWNER 2               |
|----------|---|-----------------------|-----------------------|
|          |   | YES                   | NO                    |
| <b>1</b> | Is a premium and/or lump sum payment equal to or greater than \$100,000 being made or to be made?<br><b>If the answer is "YES", each Proposed Owner must complete Question 2.</b> .....                                     | <input type="radio"/> | <input type="radio"/> |
| <b>2</b> | Do you the Proposed Owner(s), or any person to whom you are related by blood or marriage (including your common law partner) hold, or have held in the past, any of the following positions in a country other than Canada: |                       |                       |
|          | a) head of state .....  | <input type="radio"/> | <input type="radio"/> |
|          | b) member of the executive council of government or member of the legislature .....   | <input type="radio"/> | <input type="radio"/> |
|          | c) deputy minister (or equivalent) .....  | <input type="radio"/> | <input type="radio"/> |
|          | d) ambassador or ambassador's attaché or counsellor .....   | <input type="radio"/> | <input type="radio"/> |
|          | e) military general (or higher rank) .....  | <input type="radio"/> | <input type="radio"/> |
|          | f) president of a state-owned company or bank .....   | <input type="radio"/> | <input type="radio"/> |
|          | g) judge or leader or president of a political party in a legislature .....   | <input type="radio"/> | <input type="radio"/> |

**Each Proposed Owner who answers "YES" to any of the above questions, must complete questions 3, 4 and 5 (if applicable) and sign this form.**

- 3** Was the position held by you, or by a person to whom you are related?

**OWNER 1**    Self    Relative   **OWNER 2**    Self    Relative

### 4 Proposed Owner 1

- a) If the position was held by a person to whom you are related, what is the person's name and relationship to you?

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship

- b) In what country was the position held? \_\_\_\_\_

- c) When was such position held? From DD / MM / YYYY to DD / MM / YYYY

- d) Where did you obtain the funds to be used to purchase this policy or to be deposited into this account?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5 Proposed Owner 2**

a) If the position was held by a person to whom you are related, what is the person's name and relationship to you?

\_\_\_\_\_  
Name Relationship

b) In what country was the position held? \_\_\_\_\_

c) When was such position held? From DD / MM / YYYY to DD / MM / YYYY

d) Where did you obtain the funds to be used to purchase this policy or to be deposited into this account?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Sign Here**

\_\_\_\_\_  
Signature of Proposed Owner 1

DD / MM / YYYY

Date signed

**Sign Here**

\_\_\_\_\_  
Signature of Proposed Owner 2

DD / MM / YYYY

Date signed

**For Head Office Management Use**

Reviewed by \_\_\_\_\_  
Name Title

DD / MM / YYYY

Date signed



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