

FEDERAL GOVERNMENT

FORM 4

(Section 31)

**AGREEMENT OF SPOUSE OR COMMON-LAW PARTNER TO PENSION BENEFIT REDUCTION
ON DEATH OF MEMBER OR FORMER MEMBER**

I, _____, hereby certify that I, am (a) the spouse or (b) the common-law partner, as defined in section 2 of the *Pension Benefits Standards Act, 1985* of _____, a (member) (former member) _____
name of member or former member

of the pension plan known as the Multi-Sector Pension Plan.

Under the terms of that pension plan,

(a) the amount of pension benefit payable to my spouse or common-law partner as a (member) (former member) is \$ _____ per month.

and

(b) the amount of the pension benefit payable to me on the death of my spouse or common-law partner is \$ _____ per month.

this amount being not less than 60 per cent of the pension benefit payable to my spouse or common-law partner in accordance with subsection 22(2) of the *Pension Benefits Standards Act, 1985*.

Based on the above, and in accordance with subsection 22(5) of the *Pension Benefits Standards Act, 1985*, I hereby agree to waive:

Check one

1. _____ my entitlement to any pension benefit payable to me on the death of my spouse or common-law partner, or
2. _____ a portion of the pension benefit payable to me on the death of my spouse or common-law partner so that my pension benefit is \$ _____ per month.

this amount being less than the minimum 60 per cent of the pension benefit payable to my spouse or common-law partner to which I would otherwise be entitled.

Signed at _____ on the _____ day of _____, 20 _____

Signature of Witness (other than the member or former member) _____

Name of Witness: _____

Address of Witness: _____

Signature of Spouse or common-law partner: _____

Address of Spouse or common-law partner : _____