Request Form - Credit to Account and/or Currency Conversion

The "Recipient" could either be the policyowner, insured, claimant or any person designated as payee.

RFCC.02.24

General Information



In this form, "you" and "your" refer to the policyowner, life insured, claimant or any person designated as payee whose information we are processing or disclosing. We, us, our and the Company refer to Sun Life of Canada (Philippines), Inc., member of the Sun Life group of companies. Please PRINT clearly. Use BLACK ink. Indicate N /A if question is not applicable.

Name of Recipient (Last Name, First Name, M.I.)	
Policy Number(s)	nount
Details of Request Mark "A" if request is for deposit to local bank. Mark "B" if request is for currency conversion and to deposit through cross border (overseas) transfer for clients living overseas. A	
with the following information:	
Account Name	
Account Number	
Name of Bank	
Address of Bank	
Routing or Serial Number (applicable for letter B only)	rift Code Number (applicable for letter B only)
*Subject to availability of the currency in the bank	
Notes: 1. Please ensure that you provide the correct account information. The Company will not be liable if the remittance is credited to an erroneous bank account number. 2. Submit any of the following proofs of bank account: a. Bank Statement of Account b. Certificate of Bank Deposit d. Check The bank account number and the account name must appear on one (1) page and should be readable and clear. Please mask account details and names of other account holders, if any. The Company may require presentation of additional documents to validate submissions. 3 Signatures By signing, you confirm and agree that: 1. The above details are correct and that you declare under the penalty of fraud that you are the owner of the stated bank account number; 2. You will shoulder any bank fees and charges related to the deposit to your bank account; 3. Deposit of the amount through your designated bank account number or account name fully releases and discharges the Company from any claims or liabilities related thereto; 4. You agree to indemnify and hold the Company free and harmless from and against any and all claims, losses, including opportunity loss, damages, or expenses as a result of your credit to account and/or currency conversion request, including any misrepresentation as to the owner of the bank account, and/or failure of your bank or its intermediary to honor the transaction; and 5. You agree to the processing of your personal and sensitive personal information for the additional purpose of implementing your request/instructions herein in accordance with Sun Life's Privacy Policy available at https://online.sunific.com.ph/privacy, reaffirm your consent to the processing of your personal data as recorded in your most recent insurance application form, and acknowledge that such consent continues to be in full force and effect. 6. The Company may disclose your personal data to its affiliates, service providers, and therethy aparties for processing consistent with the foregoing purpose, and to comply wit	
Signature over Printed Name of Recipient X	Date of Signing (month/day/year)
Address	Contact Number(s)
Conforme (Signature over Printed Name of Policy Owner - if not the Recipient)	Date of Signing (month/day/year)