

BMO Guaranteed Investment Funds

CLAIMANT'S STATEMENT – PROOF OF DEATH
THIS FORM MUST BE FULLY COMPLETED FOR YOUR CLAIM TO BE PROCESSED

Policy Number(s) _____

DETAILS ABOUT THE DECEASED

Full name (Last, First, Initial) _____ Male
 Female

Date of Birth (dd/mmm/yyyy) _____ Date of Death (dd/mmm/yyyy) _____ Cause of Death _____

DETAILS ABOUT THE CLAIMANT/BENEFICIARY

Full name (Last, First, Initial) _____ Date of Birth (dd/mmm/yyyy) _____

Did the Deceased leave a will? Yes No Relationship to the Deceased _____ Social Insurance No. _____

Mailing Address _____ Apt. No. _____

City _____ Province _____ Postal Code _____ Telephone No. _____

If you are not the beneficiary, in what capacity are you claiming the benefits? _____
 Please provide official documentation to support this status (e.g. Will, Letter of Administration, etc.)

DETAILS ABOUT THE PAYMENT

Pay in lump sum

Transfer to my existing BMO investment. If you choose this option, please provide your policy number: _____

Other (please specify) _____

Fraud notice: Any person who knowingly files a claim containing any false or misleading information may be subject to criminal and civil penalties. BMO Life Insurance Company may deny benefits if false information materially related to the claim or application for Insurance was provided by the applicant or the claimant.

I consent and authorize BMO Life Insurance Company (BMO Insurance) to collect personal information to confirm the identity of the deceased and myself and to process this claim. I understand that a claim file will be established and access will be limited to BMO Insurance employees, its reinsurers, agents, third-party administrators, legal representatives and to those whom you have granted access, in writing, or any other persons authorized by law. I understand that I have the right to ask to review the personal information in the claim file about myself and to request to have any inaccuracies corrected, by writing to the Privacy Officer at BMO Insurance at 60 Yonge Street, Toronto, ON M5E 1H5.

I certify the answers provided herein are complete, current and accurate to the best of my knowledge. I authorize any physicians or other persons, hospitals, clinics, institutions, government authorities, insurance companies or any other corporations, that have any information, records or knowledge of the deceased to release and exchange with BMO Insurance, its employees, its reinsurers, agents, third-party administrators or legal representatives any such information for the purpose of establishing or reviewing the validity of this claim.

I also authorize BMO Insurance to use my Social Insurance Number for any tax reporting purposes.

A photocopy of this authorization, as executed by me, will be as valid as the original.

Claimant's Signature _____ Date (dd/mmm/yyyy) _____

Witness' Printed Name and Signature _____ Date (dd/mmm/yyyy) _____

Proof of Claim

Please contact your financial advisor/representative if you have any questions or require assistance completing your claim form or providing any claim requirement.

Please note: You are responsible for any charges incurred in securing any proofs of claim.

Please see additional requirements below that may be specific to your claim. BMO Insurance reserves the right to request further information it deems necessary to establish the claim or confirm the right of the Claimant to receive the benefit.

An incomplete Claimant's Statement or missing proofs of claim will result in a delay in processing your claim.

Claimant's Statement

A completed Claimant's Statement is required for all claims:

- All sections of the Claimant's Statement must be completed by the named beneficiary or the representative of the beneficiary, or estate representative. For a corporate beneficiary, the Claimant's Statement must be signed in accordance with the corporate resolution (please attach a copy of the resolution);
- If the Beneficiary is a minor the Claimant's Statement must be completed by the trustee, by the tutor for the minor in Quebec or legally appointed Guardian, for property;
- If there is more than one beneficiary, a separate Claimant's Statement must be completed by each Beneficiary.

If the policy was assigned and the assignment has been released, attach a copy of the Release of Assignment.

If the policy was assigned and the assignment has **not** been released:

- Separate Claimant's Statements must be completed by the Beneficiary and the Assignee or hypothecary creditor;
- Attach a statement from the Assignee or hypothecary creditor with the outstanding amount of the assignment.

Payment will first be made to the Assignee only to the extent to satisfy the assignee's or hypothecary creditor's interest and any balance will be paid to the beneficiary, unless directed otherwise.

Proof of Death

If death occurred in Canada or the U.S.A., one or more of the following will be required:

- Funeral Director's Statement;
- Provincial or State Death Certificate;
- Physician's Statement including the cause and date of death;
- For Quebec you could also submit a Copie d'acte de décès issued by the Directeur de l'état civil or Bulletin de décès.

If death occurred outside of Canada or the U.S.A., the following will be required:

- a notarized copy or the registration of death;
- a completed Foreign Death Claim Questionnaire.

If death was not due to natural causes or the death is being investigated for any reason, we require:

- the name, phone number and detachment of the investigating Police Officer; and
- a copy of the autopsy report.

Estate Beneficiary Designation Requirement

For all provinces other than Québec the following is required:

- If the beneficiary is the Estate, a notarized copy of the Will and Letters Probate;
- If no Will is available, a notarized copy of the Letter of Administration or Liquidator's appointment.

For the province of Québec the following is required:

- If the beneficiary is the Estate, a notarized copy of the Will if it was prepared by a Notary, or a probated copy of all other types of Wills;
- If there is no Will, a Declaration of heirship, completed in the presence of or before a Notary, outlining the legal heirs;
- A Will search certificate from the Chambre des Notaires and the Barreau du Québec.

Other requirement

If the named beneficiary is deceased, attach proof of death.

If the beneficiary is a minor:

- Attach a copy of the beneficiary's Birth Certificate; and
- A certified copy of the Letter of Guardianship of the property of the minor;
- If the Claimant's Statement is completed by a Power of Attorney for the beneficiary, attach a notarized copy of the Power of Attorney.

In addition for the province of Québec:

- If the Claimant's Statement was completed by a court appointed Tutor, attach a notarized copy of The Order;
- If the Claimant's Statement is completed by a Power of Attorney on behalf of the beneficiary, attach a notarized copy of the mandate.