

#160-4400 Dominion Street Burnaby, BC V5G 4G3 Telephone: (604) 299-7482 Toll Free: (800) 663-1356 Facsimile: (604) 299-8136

SPOUSAL DECLARATION FORM

(For members who reside in Alberta)

| I,, declare that I do | | |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| (please print your name) | | |
| | , | |
| PLEASE TICK ✓ | , | |
| [] | have a spouse as defined by the Alberta Pension Benefits Act: | |
| [] | not have a spouse as defined | by the Alberta Pension Benefits Act: |
| [] | have an ex-spouse or ex-spouses [if yes, please attach a copy of your divorce/separation agreement(s)] | |
| | | |
| | | |
| According to the Alberta Pension Benefits Act, the definition of a spouse is, | | |
| a] | a person to who you are married and not living separate and apart from, or | |
| b] | a person of the opposite sex with whom you have been living in a conjugal relationship continuously for a period of not less than three years and whom you have held out in the community as your spouse. | |
| | | |
| | | |
| NAME OF SPOUSE | | SPOUSE'S SOCIAL INSURANCE NUMBER |
| | | |
| DATE | | Member's Signature |