

Telephone Authorization Form



Please PRINT clearly.

Insured's Name(s)
Owner's Name(s)
Policy Number(s)

To Whom It May Concern:

I/We, the owner(s), of the Sun Life Assurance Company of Canada (U.S.) ("the Company") Variable Universal Life policy(ies) described above, hereby authorize the Company to accept and act upon telephone instructions from the authorized persons listed below, for the transfer of policy values between and among Fixed and Variable accounts of the contract. I/We understand and agree that (i) neither the Company nor any person acting on its behalf shall be subject to claim, loss, liability, cost or expense if it acted in good faith upon a telephone instruction in reliance on this authorization; and (ii) this authorization shall continue in force until and unless the earlier of (a) written revocation is received by the Company or (b) the Company discontinues the privilege. I also agree to the provisions stated in the "PROCEDURES FOR MAKING TELEPHONE TRANSFER OF CONTRACT VALUES" below. I further understand that the Registered Representative, Broker-Dealer, and General Agency through whom this policy was originally purchased will have access to all policy information, and will be copied on all correspondence relating to my policy, unless I specifically instruct the Company otherwise.

Please indicate the individual authorized to provide telephone transfer instructions.

- Policyowner
- Agent of Record
- Other _____ Social Security Number _____
- Other _____ Social Security Number _____

Policyowner's Signature X	Date (m/d/y)
Policyowner's Signature X	Date (m/d/y)

Procedures for Making Telephone Transfer of Contract Values

Contract owners who authorize the Company to accept telephone instructions for transfer of contract values agree to make such transfers subject to the following provisions:

1. Telephone transfer instructions received by the Variable Life Service Center before 4:00 p.m. Eastern Time will be processed at the accumulation unit values in effect at the close of business on that day. Instructions received after 4:00 p.m. on any day will be carried out as of the unit values in effect at the close of business on the following business day.
2. Instructions may be given by calling 1-800-700-6554 and speaking to one of our Customer Service Representatives.
3. Once our Service Center accepts instructions, they may not be cancelled. New telephone instructions may be given out the following day.
4. All transfers must be made in accordance with the terms of your Futurity Variable Universal Life Insurance Contract.

5. The transfer instructions given by telephone will apply only to all or a portion of existing contract values. If the allocation of any future purchase payments is to be changed, the percentages for each sub-account must be provided in a specific manner at the time of the call.
6. All or any part of a telephone conversation containing transfer instructions will be recorded.
7. This authorization shall continue in force until and unless the earlier of (a) written revocation is received by the Company, or (b) the Company discontinues the privilege. Revocation may be sent to the Variable Life Service Center.

Please Note: The policyowner(s) must sign this form exactly as the policy is registered. In some cases (for example accounts registered to a corporation or fiduciary), additional documentation such as a Corporate Resolution or Certificate of Incumbency must accompany this form. Your Sales Representative or our Variable Life Service Center can assist you in determining whether additional paperwork is needed.

Mail completed form to: Sun Life Financial
Variable Life Customer Service SC1275
P.O. Box 81173
Wellesley Hills, MA 02481