

DESJARDINS SECURITIES INC. PURCHASER COMMITMENT

(as per section 19.2 of the Quebec Regulation Respecting Supplemental Pension Plans, enabled by Supplemental Pension Plans Act)

Purchaser :					
LIF account number :					
☐ Mr. ☐ Ms. Æurname:		First name	:		
I hereby swear that I will request the interru	ntion of	navments from	my temporar	v income a	as soon
as my other income reaches \$	-	-	-	-	
			40% OF THE	rears ivia	aximum
Pensionable Earnings (YMPE), in the year _		•			
	ÁÁ _				
Date (YYYY-MM-DD)	_	Signature of purchaser			

NOTE: Whosoever makes a false declaration with the intention of obtaining a temporary income from the life income fund mentioned in the declaration is subject to the penalties provided for in sections 257 and 262 of the Supplemental Pension Plans Act.