



**Credit Union Retirement Income Fund  
SUPPLEMENTARY INSTRUCTION FORM**

Member Number: \_\_\_\_\_

Contract Number: \_\_\_\_\_

Annuitant's Name: \_\_\_\_\_

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**Investment Instructions:**

Transfer the  full proceeds (\$\_\_\_\_\_), **OR** \$\_\_\_\_\_, from Variable Savings to a Term Deposit at \_\_\_\_\_% for \_\_\_\_\_ months.

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**Payment Instructions:**

More than one change in payments per year may result in a fee charged to the MAXA Savings.

Change frequency of payments from \_\_\_\_\_ to \_\_\_\_\_, commencing \_\_\_\_\_, 20\_\_\_\_.

Change amount of payments from \$\_\_\_\_\_ to \$\_\_\_\_\_, commencing \_\_\_\_\_, 20\_\_\_\_.

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
Credit Union Signature                      Date \_\_\_\_\_                      Annuitant's Signature