

Contribution Remittance Form

Alberta School Boards Association Supplemental Integrated Pension Plan (SiPP)

School Division: _____

Account Number: RS102589

Date Remitted to Manulife: _____

Month and Year to which the contribution pertains: _____

Name of Member	Contribution Amount
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	\$ _____

Contributions to the SiPP are to be made payable to Manulife.

1. The payments and remittance forms are to be sent to Manulife.
2. A copy of the remittance form must be sent via email or fax to LifeWorks.

Send cheque and remittance form to:

Send a copy of remittance form to:

Manulife
Attn: Jing-Miao He
Group Savings & Retirement
PO Box 11464, Succ. Centre-ville
Montreal, QC H3C 5M3
Email to: retirement_solutions@manulife.com
Account reference number: RS102589

LifeWorks
Suite 400 – 411 Dunsmuir Street
Vancouver, BC V6B 1X4
Attention: ASBA Pension Team
Email to: asbapension@lifeworks.com
Fax: (604) 632-9930