Please complete this form to provide your consent to receiving voting policyholder materials electronically, including notices of meetings of voting policyholders of Sun Life Assurance Company of Canada, the related management proxy circular and form of voting proxy (collectively, “voting policyholder materials”).

Your instructions will take effect after we receive and validate the information provided on this form.

You may change/update your instructions at any time by writing to us at votingpolicyholders@sunlife.com.

### Electronic Delivery Consent Form for Voting Policyholders

<table>
<thead>
<tr>
<th>Voting policy number(s)</th>
<th>Issuing country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Full name(s) of voting policyholder(s)</th>
<th>Contact number</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Address

I/We wish to provide the following instruction to Sun Life Assurance Company of Canada:

- [ ] Going forward, I want to receive voting policyholder materials electronically at the email address indicated below.
  
  I understand that when I receive a link to access the material electronically, I am responsible for saving a copy within the available period.

  I understand that a defective email address will reset my preference to receiving paper copies by mail.

  Email: 

  Signature(s)  

Date (yyyy-mm-dd)  

Submission instructions are on the back.

Suncode 131N10  

eConsent-22.01E
Submission instructions

By Email: 1. Complete the PDF form electronically OR print, complete and scan the completed form

2. Add a password to the completed form

3. Email the password-protected form to votingpolicyholders@sunlife.com

4. Send the password in a separate email to votingpolicyholders@sunlife.com

By Mail: 1. Print and complete the form

2. Send the completed form to:

   Sun Life Assurance Company of Canada
   Corporate Secretary’s Department
   1 York Street
   Toronto, Ontario
   Canada M5J 0B6

   Attention: Compliance Team