



IN THE MATTER OF the *Pension Benefits Act*, R.S.O. 1990,
c. P.8, as amended (the “*PBA*”).

AND IN THE MATTER OF a Proposal of the Superintendent of Financial Services to Make an Order under section 87 of the *PBA* relating to the Boeing Toronto, Ltd. Non-Contributory Pension Plan for Hourly Employees of the National Automobile, Aerospace Transportation and General Workers Union of Canada (CAW-Canada) Local 1967, Registration Number 0210500

TO: **The Boeing Company**
7755 E. Marginal Way South MC11-57
Seattle WA 98108
U.S.A.

Attention: Scott Buchanan
Director Benefits Delivery

Employer & Administrator of the Plan

ORDER

ON OR ABOUT August 25, 2010, the Superintendent of Financial Services (the “Superintendent”) issued a Notice of Proposal (the “NOP”) in respect of the Boeing Toronto, Ltd. Non-Contributory Pension Plan for Hourly Employees of the National Automobile, Aerospace Transportation and General Workers Union of Canada (CAW-Canada) Local 1967, Registration Number 0210500 (the Plan), proposing to order that credited service under the Plan be given to Mr. Oldrich Pelich from July 12, 2002, to August 1, 2005, at the rate of 40 hours for each complete calendar week during that period.

NO REQUEST FOR HEARING was delivered to the Financial Services Tribunal by The Boeing Company or any other person within the time prescribed by section 89(6) of the *PBA*.

ON AUGUST 15, 2008, Ontario’s Workplace Safety and Insurance Appeals Tribunal determined that Mr. Pelich was entitled to full Loss of Earnings benefits from the date of his lay off from employment on or about July 12, 2002. Mr. Pelich was on long-term disability from that date until his retirement on August 1, 2005.

THE BOEING COMPANY (“Boeing”) has confirmed that credited service has been given to Mr. Oldrich Pelich under the Plan for the period from July 11, 2002, to July 10, 2003.

I THEREFORE ORDER, for the reasons set out in the NOP, that Boeing give credited service to Mr. Oldrich Pelich under the Plan for the period from July 11, 2003, to August 1, 2005, at the rate of 40 hours for each complete calendar week during that period, and that Mr. Pelich’s revised pension be payable from August 15, 2008, the Date of Decision of the Workplace Safety and Insurance Board Tribunal.

DATED at Toronto, Ontario, this 21st day of January, 2011.

Brian Mills
Director, Pension Plans Branch
by Delegated Authority from
the Superintendent of Financial Services

COPY TO: Mr. Oldrich Pelich
361 The West Mall
Apt. 401W
Toronto ON M9L 1E8

AND TO: Towers Watson
175 Bloor Street E.
South Tower, Suite 1701
Toronto ON M4W 3T6

Attention: Gavin Benjamin

Chart– Order – No Hearing Requested

#	TEMPLATE PROVISION	AGREED TO:	AGREED NOT TO:
1	IN THE MATTER OF the <i>Pension Benefits Act</i> , R.S.O. 1990, c. P.8, as amended (the “PBA”)	<ul style="list-style-type: none"> - use Times New Roman font and 12 pitch - bold and capitalize “IN THE MATTER OF” - italicize the name of the Act - define “PBA” here, in italics and in quotes and brackets - default of 2 Tabs for indentation unless you have space concerns 	- do no use “Act” to refer to the <i>Pension Benefits Act</i>
2	AND IN THE MATTER OF a Proposal of the Superintendent of Financial Services to (Refuse to) (Make an Order/Consent/Approve) under section ___ of the PBA relating to the ** Plan, Registration Number*****	<ul style="list-style-type: none"> - bold and capitalize “AND IN THE MATTER OF” -if refusing delete brackets around “Refuse to”; otherwise delete all of : (Refuse to) -select one of: Make an Order, Consent or Approve and delete the others and the brackets - add the section # under which the order etc is authorized - add plan name and registration number - Note on wording: ‘relating to’ optional. Use your discretion in changing <u>non-essential</u> words. - if more than one action is required, add another paragraph 	
3	TO: Name [e.g. X Co.] Address Attention: Name of Person Title Recipient [e.g. Employer]	<ul style="list-style-type: none"> - use current name and address for recipient and add the name and position of the individual responsible - define the recipient from approved list (see below) -bold name and recipient 	
4	AND TO: Name or See Schedule A (As required, see section 89 requirements) Address	<ul style="list-style-type: none"> - add parties who have rights to a hearing, and include their address and the individual responsible (see s. 89 notice requirements) - define the recipient from approved list (see below) - bold name and recipient 	- do not add persons who are not entitled to a hearing- see box 11

#	TEMPLATE PROVISION	AGREED TO:	AGREED NOT TO:
	Attention: Name of Person Title Recipient	- use "Schedule A" if all recipients do not fit on page	
5	ORDER	-bold, capitalize and centre - 14 pt font	
6	ON OR ABOUT [date], the Superintendent of Financial Services (the "Superintendent") issued a Notice of Proposal (the "NOP") in respect of the ** Plan, Registration Number, (the "Plan") (reported at Financial Services Commission of Ontario (FSCO) website, Pension e-Bulletin [month] [year], Volume __, Issue __) to ...	- bold & capitalize first words -add the name of the plan including the registration # -define "plan" here -add description of where the NOP can be found on the FSCO web site	
7	NO REQUEST FOR HEARING was delivered to the Financial Services Tribunal by the Applicant or any other person within the time prescribed by section 89(6) of the <i>PBA</i> .	- bold & capitalize first words	
8	For the reasons set out in the NOP, I ORDER...	-consider a page break so that the signature page contains at least some of the Order wording that occurs prior to the date line	
9	DATED at Toronto, Ontario, this _ day of (month), 2007.	- add the month and date, and ensure year is correct - bold and caps "Dated"	

#	TEMPLATE PROVISION	AGREED TO:	AGREED NOT TO:
10	<p>_____</p> <p>Tom Golfetto Director, Pension Plans Branch by Delegated Authority from the Superintendent of Financial Services</p>		
11	<p>copy:</p> <p>SCHEDULE "A"</p> <p>TO: Name [e.g. X Co.] Address</p> <p>Attention: Name of Person Title Recipient [e.g. Employer]</p> <p>AND TO: (as required)</p>	<p>- if copies are required, use "copy:"</p> <p>- names and addresses of all those persons to whom the Superintendent wishes to provide copies - such as legal counsel, consulting firm, actuary.</p>	

Approved List of Recipients

- Applicant(s)
- Employer/Employer and Administrator
- Participating Employer
- Administrator
- Trustee in Bankruptcy of [Co. Name]
- (Interim) Receiver (and Manager) for [Co. Name]
- Union
- Agent of [...]