



**Internal Use Only**

Date received \_\_\_\_\_

Principal Approval \_\_\_\_\_

**Indexed Annuity Client Disclosure Form**

(this form must be submitted with all indexed annuity transactions)

**A) Client Information:**

Full Name of Client \_\_\_\_\_ SSN \_\_\_\_\_

Spouse/Joint Client \_\_\_\_\_ SSN \_\_\_\_\_

***Please attach Account Information form***

*Date of form: \_\_\_\_\_ If older than 3 years, please complete a new form.*

**B) Transaction Type:** \_\_\_\_\_ Solicited \_\_\_\_\_ Unsolicited

Product name: \_\_\_\_\_

Transaction Amount: \$ \_\_\_\_\_ Expected add on payments 1<sup>st</sup> yr: \_\_\_\_\_

**C) Please describe reason for the purchase:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**D) Source of funds:** \_\_\_\_\_

**E) For 1035 Exchange, Transfers, Rollovers or other Replacements:**

Could existing product meet client needs? **Y / N** Explain: \_\_\_\_\_

\_\_\_\_\_

Current Account Value: \$ \_\_\_\_\_ Current Death Benefit: \$ \_\_\_\_\_

Surrender Charge or CDSC % : \_\_\_\_\_ Estimated Cost to Transfer: \$ \_\_\_\_\_

**F) New Surrender Charge Schedule:** \_\_\_% yr 1; \_\_\_% yr 2; \_\_\_% yr 3; \_\_\_% yr 4; \_\_\_% yr 5  
\_\_\_% yr 6; \_\_\_% yr 7; \_\_\_% yr 8; \_\_\_% yr 9; \_\_\_% yr 10

**G)** \_\_\_\_\_ *(client(s) please initial)* I understand the interest crediting options for this fixed annuity and that I am not purchasing a security or shares of any stock or index. I have received written information describing the annuity and the options selected. I have had ample opportunity to ask questions of my/our representative and am satisfied with the explanations given.

I understand that it is my/our responsibility to carefully read and understand all materials received prior to investing. I consider this a suitable investment for me given my current financial circumstances and risk tolerance at this time. I have been informed of the charges and costs of this transaction and realize that if I want to liquidate this transaction prior to the end of the surrender charge period described in section F above, I may not receive my total principal back.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representative Name

\_\_\_\_\_  
RR #

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Date