



3. Signatures

I have read, understand, and authorize the debits requested on this form.

X

Signature of Annuitant/Insured

Date (mm/dd/yyyy)

X

Signature of Contractowner
(if different than Annuitant)

Date (mm/dd/yyyy)

X

Signature of Joint Owner (if applicable)

Date (mm/dd/yyyy)

X

Signature of Spouse (if Community Property State)
(AZ, CA, ID, LA, NM, NV, TX, WA, WI)

Date (mm/dd/yyyy)

X

Signature of Registered Representative (optional)

Date (mm/dd/yyyy)

