
Date

ATTENTION: Policyholder Service Department

Name of Insured: _____

Policy Number: _____

Please provide the following information for the above referenced policy:

- Current inforce illustration, projecting current policy values and death benefits to endowment age assuming current interest (if VUL assume 8%).
- Current death benefit.
- Current cash surrender value, including paid up additions, if any.
- Current surrender penalty and remainder of penalty period, if any.
- Current loans against the policy, if any.
- Current premium status and scheduled annualized premium.
- Type of policy and date of issue. Qualified or non-qualified policy?
- Underwriting risk class (preferred/standard/sub-standard).
- Smoker/Non-smoker.
- Riders and/or options and their cost.
- Policy cost basis information, if available.
- Policy beneficiary or beneficiaries.
- Policy owner.

Please return the above requested information directly to my attention at:

Policy Owner Signature

Policy Owner Name - Print

Date

Policy Owner Address