

Durable Power of Attorney– Affidavit and Indemnification, Annuities

Use this form to certify the validity and effectiveness of the Durable Power of Attorney (POA) that granted you the power to act on behalf of the contract owner of the Fidelity contracts listed on this form and to indemnify Fidelity. Do NOT use this form for any trust or custodial contracts. Type on screen or print out and fill in. For best results, use CAPITAL letters and black ink. Need more room for information or signatures? Use a copy of the relevant page.

Helpful to Know

- You must submit a copy of the documents naming you the Attorney-in-Fact for the contract owner, as well as copies of any supporting documents, along with this form.
- Each Attorney-in-Fact added to a contract must complete and submit a separate form.

1. Contract (Owner									
Phone numbers are for questions about	Name									
this request only; they will not update	Evening Phone Daytime Phone					Extension				
your Fidelity con- tact information.										
2. Contract(s) Included										
	Contract Number	Contra	Contract Number			Contract Number				
3. Attorney-	in-Fact									
Be sure to provide	First Name	M.I.	Last Name				Social Secu	urity or T	axpayer ID Num	ber
your full legal name.	D. (Pid monard									
	Date of Birth MM DD YYYY Evening Ph	none			Daytime Phone				Extension	
Legal/Residential	Address									
Cannot be a PO Box, Mail Drop,	Address									
or c/o.	City	State/	State/Province Zip/Postal Code		stal Code	Country				
Mailing Address										
	Same as legal/residential address									
	Address									
	City	State/	Province	Zip/Pos	stal Code	Country	/			
4. Duplicate	Materials									
Check ONLY one. Send copies of account statements, transaction confirmations, and related prospectuses to your Materials will be sent by U.S. mail.								your A	ttorney-in-Fa	act
	Do NOT send copies of account statements, transaction confirmations, and related prospectuses to your Attorney-in-Fact ▷ Default if no choice is indicated.									
	.,					Form o	continues	on ne	ext page.	•

1.897889.103 Page 1 of 2 017000101

5. Attorney-in-Fact Signature and Date Named Attorney-in-Fact must sign and date.

By signing below, you:

- Affirm that you have read, and that you understand and agree to be bound by, the provisions of this form as well as (and without limitation) the terms and conditions governing Fidelity's relationship with the contract owner as set forth in the contract, as is currently in effect and as may be amended in the future.
- Affirm that you are the individual named in the document(s) appointing the Attorney(s)-in-Fact for the contact owner named in Section 1 and the contract(s) listed in Section 2.
- Accept appointment as Attorney-in-Fact for the contract owner, according to all terms and conditions described in this form.
- Affirm that the contract owner is not deceased, has not partially or totally revoked, suspended, or terminated the authority delegated and that there is no petition pending to determine the incapacity or to appoint a guardian for the contract owner.
- Agree not to issue or relay any instructions that you believe to be inconsistent with your powers or responsibilities as Attorney-in-Fact.
- Agree to identify yourself as Attorney-in-Fact when signing documents on behalf of the contract owner, using either of these accepted forms: "[contract owner name] by [your signature] as Agent," or "[your signature] as Agent for [contract owner name]".
- Indemnify and hold Fidelity harmless from and against any and all losses, liabilities, claims, and costs (including reasonable attorneys' fees) resulting from transactions made in accordance with your

- instructions. You further agree that the indemnifications in this bullet are in addition to, and do not limit, any rights that Fidelity may have under any other agreement with you.
- Agree that Fidelity may restrict or suspend your ability to remove money from the contract(s) listed in Section 2.
- Agree to serve as Attorney-in-Fact, and acknowledge that you shall remain Attorney-in-Fact, until Fidelity has received what it considers to be satisfactory written notice of either the contract owner's death or your removal or resignation as Attorney-in-Fact. Written notice to the contract owner and to any co-agent, successor agent, or the contract owner's guardian (if one has been appointed), will ordinarily constitute satisfactory notice of resignation.
- Agree to cease acting as Attorney-in-Fact if you know, or have reason to know, that your capacity to act as Attorney-in-Fact has been limited or terminated for any reason.
- Represent that if there are multiple Attorneys-in-Fact authorized with respect to the contract(s) listed in Section 2, you are authorized to act severally or individually, and that Fidelity may follow any of your instructions independent of all other Attorneys-in-Fact, including the delivery of assets to you personally.
- Understand that in the event of any conflict between instructions given by Attorneys-in-Fact or by a contract owner and an Attorneyin-Fact, Fidelity may restrict the contract until it has received joint written instructions that it finds satisfactory.

This durable POA shall be governed by Utah law (or New York law for New York Residents), except with respect to its conflict of laws provisions.

Sign ONLY in the presence of a notary.

Attorney-in-Fact Name	
Attorney-in-Fact Signature	Date MM DD YYYY
SIGN	•

,		,	_
Certificate of Acknowledgem	ent of Notary Public Must be a	U.S. Notary. Foreign no	otary or consular seals may NOT be substituted.
State of	, in the County of	· · · · · · · · · · · · · · · · · · ·	subscribed and sworn to before me by the
above-named Attorney-in-Fact wh	o is personally known to me or wh	o has produced	as identification, that
the foregoing statements were tru	e and accurate and made of his/he	er own free act and d	eed, on/
Print Notary Name			▼ NOTARY SEAL/STAMP ▼
Notary Signature		Date MM DD YYYY	
SIGN			
My commission expires/_	<i>J</i> .		

Did you sign the form and attach any necessary documents? Send the ENTIRE form and any attachments to Fidelity Investments.

Questions? Go to fidelity.com/poa or call 1-800-634-9361.

Regular Mail Except NY

Annuity Service Center PO Box 770001 Cincinnati, OH 45277-0050 Regular Mail NY only

Annuity Service Center

PO Box 770001 Cincinnati, OH 45277-0051 Overnight Mail

Fidelity Investments 100 Crosby Parkway, KC2Q Covington, KY 41015

Fidelity insurance products are issued by Fidelity Investments Life Insurance Company (FILI), 100 Salem Street, Smithfield, RI 02917, and in New York, by Empire Fidelity Investments Life Insurance Company,® New York, N.Y. FILI is licensed in all states except New York. A contract's financial guarantees are subject to the claims-paying ability of the issuing insurance company.

Fidelity Brokerage Services LLC, Member NYSE, SIPC. 446062.8.0 (12/13)

1.897889.103 Page 2 of 2 017000102

