



SIMPLE IRA EMPLOYER INFORMATION

CONTACT INFORMATION

Pacific Life Insurance Company
P.O. Box 2378
Omaha, NE 68103-2378

All Overnight Deliveries:
6750 Mercy Rd, 4th Floor, RSD
Omaha, NE 68106

Owners: (800) 722-4448
Fax: (888) 837-8172
Web Site: www.PacificLife.com

Registered Representatives: (800) 722-2333

CONTACT INFORMATION (for New York only)

Pacific Life & Annuity Company
P.O. Box 2829
Omaha, NE 68103-2829

Phone: (800) 748-6907
Fax: (800) 586-0096
Web Site: www.PacificLifeandAnnuity.com

Use this form when:

- Establishing a new SIMPLE IRA annuity contract at Pacific Life. Pacific Life will only act as a nondesignated financial institution.
- There has been a change of employer on an existing SIMPLE IRA annuity contract at Pacific Life.
- Transferring SIMPLE IRA assets into an existing SIMPLE IRA annuity contract at Pacific Life.
- Providing list bill information.

1 GENERAL INFORMATION Owner's Name (First, Middle, Last)	Daytime Telephone Number	Annuity Contract Number (if known)
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2 SIMPLE IRA EMPLOYER INFORMATION

New SIMPLE IRA annuity contract — Provide current employer information in Section 2A of this form. Complete and attach an application.

Change of employer on an existing SIMPLE IRA annuity contract at Pacific Life — Provide both current and former employer in Sections 2A and 2B.

Transferring SIMPLE IRA assets into an existing SIMPLE IRA annuity contract at Pacific Life — Provide former employer information if different than current employer. Complete and attach transfer paperwork.

A. Current Employer

Name of Current Employer with SIMPLE IRA Plan		Original Participation Date (mo/day/year)
Current Employer's Mailing Address		Employer's Telephone Number
City	State	ZIP

B. Former Employer

Name of Former Employer with SIMPLE IRA Plan		Original Participation Date (mo/day/year)
Former Employer's Mailing Address		Employer's Telephone Number
City	State	ZIP

3 LIST BILL INFORMATION A list bill will be provided to your employer if your employer has 5 or more annuity contracts with Pacific Life. Billing frequency is monthly. A list bill is a reminder to the employer to make these payments, not a statement of charges.

_____	\$ _____
List Bill number (if known)	Billing Amount (minimum \$50)

Pacific Life refers to Pacific Life Insurance Company and its affiliates, including Pacific Life & Annuity Company. Insurance products are issued by Pacific Life Insurance Company in all states except New York and in New York by Pacific Life & Annuity Company. Product availability and features may vary by state. Each company is solely responsible for the financial obligations accruing under the products it issues. Insurance product and rider guarantees are backed by the financial strength and claims-paying ability of the issuing company and do not protect the value of the variable investment options.



Annuity Contract Number _____

4 SIGNATURE AND CERTIFICATION

I understand and agree that:

- (a) the Internal Revenue Code requires Pacific Life to send a summary description letter to all employers sponsoring a SIMPLE IRA plan.
- (b) if I change employers and my new employer sponsors a SIMPLE IRA plan, I will notify Pacific Life, using this form, of my change of employer.
- (c) if I am making employee salary deferrals, I have completed a salary reduction agreement authorizing my employer to send salary deferrals to Pacific Life. Pacific Life will allocate my salary deferrals according to the instructions I provide. I can change these allocations at any time by completing a Transfers and Allocations form. Any allocation changes must be submitted prior to my next salary deferral being sent to Pacific Life.
- (d) if I am providing this form to Pacific Life by fax, it is as valid as the original.
- (e) I have read, understood and accepted the provisions on this form.

**SIGN
HERE** _____
Owner's Signature_____
mo / day / yr**INSTRUCTIONS**

- 1 General Information:** Provide the owner's name, daytime telephone number and contract number, if applicable.
- 2 SIMPLE IRA Employer Information:** Check the box indicating whether this is a new SIMPLE IRA contract at Pacific Life, change of employer on an existing SIMPLE IRA contract at Pacific Life, or a transfer of SIMPLE IRA assets into an existing SIMPLE IRA contract at Pacific Life. Complete 2A and 2B as appropriate.
- 3 List Bill Information:** A list bill will be provided to your employer if your employer has 5 or more annuity contracts with Pacific Life. Billing frequency is monthly. A list bill is a reminder to the employer to make these payments, not a statement of charges.
- 4 Signature and Certification:** This form must be signed by the owner. By signing, you agree that you have read, understood and accepted the provisions contained in this form.

