

P.O. Box 9371, Des Moines, Iowa 50306-9371 1-800-247-2190

DIVIDEND OPTIONS

I, _____, owner of policy _____,

request future dividends be: (check one)

- \Box Paid in cash
- □ Used to reduce my premium
- □ Held to accumulate at interest
- □ Used to purchase paid-up additional insurance

Date

Owner's Signature