

ING USA Annuity and Life Insurance Company

## AGENT CONTRACT TRANSMITTAL

# (This form should be used by new and existing agents who want to transfer or make changes to their personal information.)

□ New Agent □ Transfer/Change in Commission Level □ Change to Personal Information

1. Agents that are new, transferring, or changing commission level, please complete Sections 1 and 3 below:

I am requesting that ING USA Annuity and Life Insurance Company accept this request to transfer my current reporting status, in accordance with their transfer policies, and/or change my commission level, to what is listed below.

Agent's Name (Please print)	Commission Level (e.g. MGA II, GA, LA,)
Corporate Name (if different than Agent's)	

#### Please list the agent or agency to which this entity will directly report for commission purposes.

Upline's Name	Upline's Contract Number
Michael Ferguson	122643

#### 2. Agents who are wanting to make changes to their personal information, please complete Sections 2 and 3 below:

Agent Name	Social Security Number	
Residential Address (Street, PO Box, City, State, ZIP)		
Residential Phone Number		
Business Address (Street, PO Box, City, State, ZIP)		
Business Phone Number		
Fax	E-mail address	

### 3. By signing below, I acknowledge all information above as accurate to the best of my knowledge .

Agent's Signature	Date