



1. Client Name _____
- Source of Funds ☐ W-2 Wages ☐ Investments ☐ Social Security or Pension ☐ Savings
☐ Another insurance contract ☐ Other _____

USA PATRIOT Act Notice – to be read by or to customer:

2. The USA PATRIOT Act requires that we establish an Anti-Money Laundering (“AML”) program, notify customers that we must verify the identity of the owners(s) of our contracts, and collect documents and information sufficient to provide such verification. You should know that failure to provide the requested identification will result in delays in the issuance of the requested annuity and may result in a decision not to accept your business.

Customer Identification Verification In order to satisfy such obligations, we require our representative to review and verify a current government issued photo ID for each owner/Trustee/Partner associated with a contract. Information on such identification must be recorded below. We may use third party sources to verify the information provided.

a. Identification Verified (One for each Owner/Trustee/Partner. Use additional forms if necessary.)

Owner/Trustee/Partner

- ☐ Driver's License
☐ Permanent Resident Card
☐ Passport
☐ Other: _____

Joint Owner/Trustee/Partner

- ☐ Driver's License
☐ Permanent Resident Card
☐ Passport
☐ Other: _____

The following information should be recorded exactly as it appears on the identification reviewed:

Name _____ Date of Birth _____
Street Address (not P.O. Box) _____
City, State, Zip _____
ID # _____ State/Country _____ Expiration Date _____

Name _____ Date of Birth _____
Street Address (not P.O. Box) _____
City, State, Zip _____
ID # _____ State/Country _____ Expiration Date _____

- b. Entity Verification:** Check the appropriate entity as listed below and submit copies of documentation viewed to gain first-hand knowledge of the existence of a legitimate business. If the Owner is a minor or non-legal entity, review the identification of the individual who submits an application on behalf of the minor or non-legal entity.

- ☐ **Corporation, LLC, PC or PLLC:** Articles of Incorporation, Organization or Association or similar document filed in the state in which the entity is formed.
☐ **Limited Partnership:** Certificate of Limited Partnership or similar document filed in the state where the partnership is formed.
☐ **General Partnership or Joint Venture:** Partnership Agreement, Joint Venture Agreement or similar agreement governing the formation and operation of the partnership.
☐ **Trust and all other entities:** Document governing the formation and operation of the entity.

AGENT STATEMENT - By signing I certify that:

☐ I certify that I personally met with the above individuals and reviewed the above identification document. To the best of my knowledge, it accurately reflects the identity of the proposed Owner(s)/Trustee(s)/Partners.

☐ I was unable to personally review the identification documents for the reason stated below. I certify that, to the best of my knowledge, the information provided by the Owner(s)/Trustee(s)/Partners is true and accurate.

Reason for not reviewing the documents _____

Agent Signature _____ Date _____

_____ V _____
Print Name of Agent & Agent ID No.