Customer Name (please print):

Customer intends to implement the recommendation of Insurance producer/agent to purchase the PRODUCT using funds from an individual retirement account ("IRA") or other qualified plan as set forth below.

This disclosure, as well as the attached Customer Acknowledgement and Authorization Form are both required under the Employee Retirement Income Security Act of 1974 ("ERISA") in order to comply with Department of Labor regulation transaction exemption known as PTE 84-24.

Insurance Produ	cer/Agent Name: _	
Business Mailing	g Address:	
Business Teleph	one Number:	
Product Name:		(the "PRODUCT")
Issued by:		(the "INSURANCE COMPANY)
Product type:		Annuity Fixed Index Universal Life Insurance

Insurance producer/agent is able to solicit insurance or annuity contracts issued by any insurance carrier with whom he/she is duly appointed. Insurance producer/agent is appointed with INSURANCE COMPANY to sell the PRODUCT but is not an employee of INSURANCE COMPANY or its affiliates. INSURANCE COMPANY is not responsible for day to day supervision of Insurance producer/agent.

What Types of Products can the Insurance Producer/Agent Sell?

Insurance producer/agent is licensed to sell insurance and/or annuities to the customer in accordance with state law. If insurance producer/agent recommends that the customer buys any insurance product or annuity, it means insurance producer/agent believes that it effectively meets the customer's financial situation, insurance needs, and financial objectives.

How Insurance Producer/Agent is Paid

It's important for the Customer to understand how insurance producer/agent is paid for their work. Depending on the particular annuity the customer purchases, insurance producer/agent may be paid a commission or a fee. Commissions are generally paid to insurance producer/agent by the insurance carrier while fees are generally paid to insurance producer/agent by the consumer. If the customer has questions about how insurance producer/ agent is paid, please ask the insurance producer/agent.

Commission Disclosure

The insurance producer/agent will receive the following commissions from the sale of the PRODUCT:

- ____% of gross premium payments paid to INSURANCE COMPANY during the first contract year; and
- ____% of gross annual premium payments paid to INSURANCE COMPANY in each after the first year or?

From time to time, the insurance producers/agents may also be eligible for certain types of indirect or additional compensation based on sales of the INSURANCE COMPANY's particular insurance and/or annuity products in a calendar year. These types of compensation may include, but is not limited to, additional commission paid ______ based on total production in prior years (up to ____%,) access to continuing education, sales leads, training, conferences, recognition trips, vouchers for specified products, branded merchandise and gift cards.

Acknowledgement and Authorization

The above named customer is the sole owner of an IRA or other qualified plan assets that is being used to purchase THE PRODUCT. As the customer, I approve and authorize the purchase of the PRODUCT and further confirm that:

- (a) I shall not receive directly or indirectly, any commission or payment from any party as a result of my purchase of the PRODUCT.
- (b) I am not the insurance producer/agent.
- (c) I am not a direct family member* of the insurance producer/agent.
- (d) I do not have any business affiliation with the insurance producer/agent, or the INSURANCE COMPANY.
- (e) I am not an officer, director, employee or partner of the insurance producer/agent, the INSURANCE COMPANY, or any corporation or partnership where those parties are officers, directors, employees or partners.
- (f) I have received this Disclosure and Acknowledgment Form prior to the purchase of the PRODUCT.
- (g) I received from the Insurance Producer/Agent any and all disclosure document(s) for the PRODUCT indicated above, which describes the PRODUCT's charges, fees, discounts, penalties, or adjustments.
- (h) I approve the Insurance Producer/Agent's recommendation of the PRODUCT.

Customer	Signature
----------	-----------

Insurance Producer/Agent

Date

Date