INSURANCE AGENT (PRODUCER) DISCLOSURE FOR ANNUITIES Do Not Sign Unless You Have Read and Understand the Information in this Form

Date:		
INSURANC	E AGENT (PRODUCER) INFORMATION ("	Me", "I", "My")
First Name: _		_ Last Name:
Business\Age	ency Name:	Website:
Business Mai	ling Address:	
Business Tele	ephone Number:	
Email Addres	ss:	
	R INFORMATION ("You", "Your")	
First Name: _	I	ast Name:
I am licensed that it effective life insurance		law. If I recommend that You buy an annuity, it means I believe reds, and financial objectives. Other financial products, such as ret Your needs.
1 offer the for		
	Fixed or Fixed Indexed Annuities	
	Variable Annuities	
	Life Insurance	
	rate license to provide advice about or to sell non- ancial products that I am licensed and authorized	insurance financial products. I have checked below any non- to provide advice about or to sell.
	Mutual Funds	
	Stocks/Bonds	
	Certificates of Deposits	
Whose Annu	nities Can I Sell to You?	
I am authoriz	ed to sell:	
	Annuities from Only One (1) Insurer	☐ Annuities from Two or More Insurers
	Annuities from Two or More Insurers although I primarily sell annuities from:	
1		

How I'm Paid for My Work:

It's important for You to understand how I'm paid for my work. Depending on the particular annuity You purchase, I may be paid a commission or a fee. Commissions are generally paid to Me by the insurance company while fees are generally paid to Me by the consumer. If You have questions about how I'm paid, please ask Me.

Depending on the particular annuity You buy, I will or may be paid cash compensation as follows:
Commission, which is usually paid by the insurance company or other sources. If other sources, describ
Fees (such as a fixed amount, an hourly rate, or a percentage of your payment), which are usually paid directly by t customer.
Other (Describe):
If You have questions about the above compensation I will be paid for this transaction, please ask me.
I may also receive other indirect compensation resulting from this transaction (sometimes called "non-cash" compensation) such as health or retirement benefits, office rent and support, or other incentives from the insurance company or other sources.
Drafting Note : This disclosure may be adapted to fit the particular business model of the producer. As an example, if the producer only receives commiss or only receives a fee from the consumer, the disclosure may be refined to fit that particular situation. This form is intended to provide an example of hor communicate producer compensation, but compliance with the regulation may also be achieved with more precise disclosure, including a written consult advising or financial planning agreement.
Drafting Note: The acknowledgement and signature should be in immediate proximity to the disclosure language.
By signing below, You acknowledge that You have read and understand the information provided to You in this document.
Customer Signature
Date
Agent (Producer) Signature
Date