

**IMPORTANT NOTICE REGARDING A REPLACEMENT INVOLVING
VARIABLE LIFE INSURANCE OR ANNUITIES**

Must accompany all applications where a variable product replacement is involved.

Policy/contract being replaced _____ Policy/contract number _____

Company _____

Plan of Insurance/Type of annuity _____

Description _____

Amount of Insurance: \$ _____ Effective Date _____

Issue Age _____ Total Premium: \$ _____

How will the insurance and cash value of this policy be affected? _____

What are the benefits of replacing this policy/contract? _____

Agent Signature

Agent Address

Owner's Name

Owner's Address

Date