NAIC Annuity Disclosure

Appendix A

Insurance Agent (Producer) Disclosure For Annuities

Do Not Sign Unless You Have Read and Understand the Information in this Form		
Date:		
Insurance Agent (Producer) Information ("Me", "I	", "My")	
First Name:	_ Last Name:	
	_ Website:	
Business Mailing Address:		
Business Telephone Number:		
Email Address:		
National Producer Number (NPN):	NPN State:	
Customer Information ("You", "Your")		
First Name:	_ Last Name:	
period and surrender charge; potential tax penalties; mo	various features of the annuity, including its potential surrender ortality and expense fees; investment advisory fees; annual fees; inons of the annuity; limitations on interest returns; potential changes and investment components; and market risk.	
I am licensed and authorized to offer the following proc ☐ Fixed or Fixed Indexed Annuities ☐ Variable Annuities ☐ Life Insurance	ducts:	
I need a separate license to provide advice about or to insurance financial products that I am licensed and auth Mutual Funds Stocks/Bonds Certificates of Deposits	sell non-insurance financial products. I have checked below any non- porized to provide advice about or to sell.	

Whose Annuities Can I Sell to You?		
I am authorized to sell:		
☐ Annuities from Only One Insurer ☐ Annuities from Two or More Insurers		
☐ Annuities from Two or More Insurers although I prima	urily sell annuities from:	
How I'm Paid for My Work:		
It's important for You to understand how I'm paid for my work paid a commission or a fee. Commissions are generally paid to Me by the consumer. If You have questions about how I'm paid to Me by the consumer.	o Me by the insurance company while fees are generally paid	
Depending on the particular annuity You buy, I will or may be Commission, which is usually paid by the insurance cor	•	
Fees (such as a fixed amount, an hourly rate, or a percetthe customer. Other (Describe):	entage of Your payment), which are usually paid directly by	
If You have questions about the above compensation I wi	Ill be paid for this transaction, please ask Me.	
For Minnesota sales only: • If the amount of cash compensation I receive is a mult	iple-occurrence amount, the frequency and amount of the	
 occurrence may be stated as a range of amounts or personal to the right to request additional information from the re	ercentages.	
transaction. ☐ If You would like to receive an estimate of the amount cash compensation is a onetime or multiple-occurr	unt of cash compensation I will receive, and/or whether the ence amount, please check the box.	
I may also receive other indirect compensation resulting from such as health or retirement benefits, office rent and support, of sources.	•	
By signing below, You acknowledge that You have read and ur	nderstand the information provided to You in this document.	
Customer Printed Name	Agent (Financial Professional) Printed Name	
Customer Signature	Agent (Financial Professional) Signature	

Date

Date