

Life only disclaimer



Mail to: P.O. Box 9261, Des Moines, IA 50306-9261
Overnight: 8300 Mills Civic Pkwy, West Des Moines, IA 50266-3833

Instructions

Use this form when you have elected a Life Only Income Option.

1. Contract information

Contract number

Owner's name (first, middle initial, last)

Social Security number

Joint Owner's name (first, middle initial, last) – If applicable

Social Security number

Non-natural Owner* – If applicable

TIN/EIN

Street address

Apartment/Suite number

City

State

ZIP

Phone number

* Please complete and submit a copy of the Certification of Trust Agreement if this policy is owned by a Trust.

2. Fraud statements

CA Residents: for your protection California law requires the following to appear on this form:

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

3. Acknowledgement and signatures

You have elected a Life (Only) Income option, which means that payments will be made only during the life of the annuitant. After the annuitant's death, no further payments will be made. If this is a Joint Life (Only) Income option, after the last annuitant's death, no further payments will be made. No payments will be made to the annuitant's estate or to any other person. Please refer to the prospectus for complete details.

I acknowledge that I fully understand this payout option and agree to its terms.

Owner's Signature

Date signed (mm/dd/yyyy)

Joint Owner's Signature

Date signed (mm/dd/yyyy)

Name of witness (If applicable)

Witness' Signature

Date signed (mm/dd/yyyy)

Variable annuity products are issued by Midland National® Life Insurance Company distributed by Sammons Financial Network®, LLC., member FINRA.



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NOT FDIC/NCUA INSURED, MAY LOSE VALUE INCLUDING LOSS OF PRINCIPAL, NO BANK/CU GUARANTEE, NOT A DEPOSIT, NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY.