

# Large case request form



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 to request a new case above the initial contribution limit. The service team will contact you if additional information is needed. Note that this form is reviewed separately from the application and the case will be subject to additional review before issue.

**IMPORTANT: All fields are required. Large case exceptions cannot be granted if this form is incomplete.**

## 1. Personal information

Representative name

Representative number

Account Holder's name (first, middle initial, last)

Account Holder's age

Birth gender

M  F

Last 4 digits of Account Holder's Social Security number or Tax Identification number

## 2. Product information

### Product:

Mutual Fund IRA  Mutual Fund Plus IRA

Tax status (IRA, Roth IRA, etc.)

Expected initial contribution

Source of contribution

Expected time frame for funding

Investment strategy

Existing Midland National Life Insurance Company, Sammons Institutional Group, or North American Company contracts/accounts, both active and pending, other than the one you are requesting the high dollar exception for.

Contract/account number: \_\_\_\_\_ Value: \_\_\_\_\_ Product: \_\_\_\_\_ Rider (if applicable): \_\_\_\_\_ Issue date: \_\_\_\_\_

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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.

### 3. Other information

General health status

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Percent of assets that are liquid

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Total estate value or net worth

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Purpose of the account

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Does the client plan to withdraw funds in the first two years?  Yes  No

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Current residence

- Personal residence
  - With family members
  - Nursing home
  - Assisted living
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