Clear

GUARANTY

INCOME LIFE INSURANCE COMPANY
929 Government Street • Baton Rouge, LA 70802
P.O. Box 2231 • Baton Rouge, LA 70821-2231
800-535-8110 • 225-383-0355 • FAX: 225-343-0047
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ELECTION OF AUTOMATIC WITHDRAWALS

Annuity Number	Annuitant	Owner

1. Automatic Withdrawals

I wish to begin receiving automatic withdrawals of interest from my annuity.

☐ Monthly ☐ Quarterly ☐ Semi-annually ☐ Annually

☐ Interest Only *or* ☐ Specific amount of $ _____

2. Election for Withholding

If you elect not to have Federal Income Tax withheld, you are liable for payment of Federal Income Tax on the taxable portion of your withdrawal. You also may be subject to a 10% "Premature Distribution Penalty" if you are not yet 59 ½ and other tax penalties under the estimated tax payment rules if your payment of estimated tax and withholding, if any, are adequate. Your election will remain in effect until you revoke it. You may revoke your election at any time by sending a completed, signed and dated revocation to this office.

I, _____ , owner of the above-referenced Policy,

☐ **DO NOT** want to have Federal Income Tax withheld from my withdrawal.
☐ **DO WANT** to have Federal Income Tax withheld from my withdrawal.

at the rate of _____ %

3. Electronic Funds Transfer ☐

Please deposit my withdrawals by Electronic Funds Transfer into my

☐ Checking account no. _____
Transit/ABA Number: _____

☐ Savings account no. _____
Transit/ABA Number: _____

With _____
Name of Financial Institution

Please Attach Voided Check

4. Mail Check to: ☐

SIGN BELOW FOR ABOVE REQUEST

Dated at _____ (City/State) this _____ (Day) day of _____ (Month), _____ (Year)

X _____
Signature of Owner(s)

_____
Social Security No.