

III. Delivery Method

You may elect to have your funds sent by regular mail or Electronic Funds Transfer. If no election is indicated, a check will be mailed to you.

Important Information Regarding Electronic Funds Transfer (EFT) (Please Read)

- Once your withdrawal has been processed, funds will generally be available after three business days.
- Should an inappropriate deposit be made, the financial institution is authorized to make a debit entry to my account and return the corrected amount to North American.

- Send Check out regular mail.
- Send funds EFT (If the required documentation is not provided at the time of this request, a check will be issued and sent to your address of record). – I authorize North American to automatically deposit this withdrawal into my:
 - Checking Account** – A voided check is required to send funds EFT to your checking account.
 - Savings Account** – To send funds to a savings account, a letter is required. Please provide a letter on your bank's letterhead, signed by a bank official, with your name, account number and routing number.
 - Please use EFT information currently on file.

IV. Election of Withholding (Must be completed)

You must indicate if Federal/State income taxes should be withheld from your payment by signing and dating this election form and returning it to North American. State taxes will be withheld only if required by your state. Even if you elect not to have Federal/State income taxes withheld, you are liable for Federal/State income taxes on the taxable portion of your benefits. You may also be subject to tax penalties under the Estimated Tax Payment rules if your payments of estimated tax and withholding, if any, are not adequate. **If no election is made, 10% Federal income tax will be withheld.**

Check only one box – Checking more than one box will cause a delay in processing.

- I **do not** want Federal/State income taxes withheld from my payment.
- I **do want** Federal/State income taxes withheld from my payment. Federal % State %

Taxpayer Identification Number (TIN):		
Contract Owner Social Security Number	Joint Owner Social Security Number	Employer Identification Number
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Certification - Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and;
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and;
3. I am a U.S. citizen.

V. Acknowledgement

I/We hereby acknowledge that the information provided herein is to the best of our knowledge true and accurate. I/We also acknowledge that this form must be fully completed, and failure to complete any portion of this form may delay the processing of this request. The completion of this form is necessary to satisfy the Written Notice Requirement as defined in Section 1 of your Contract.

Contract Owner Signature/Assignee: _____ Date: - -

Joint Owner Signature/Assignee: _____ Date: - -

Spousal Signature: _____ Not Married Date: - -
(Spousal signature applicable only if the Contract was issued in or the Contract owner resides in: AK, AZ, CA, ID, LA, NM, NV, TX, WA, or WI)

Notary Signature: _____ Date: - -
(A notary signature is needed for all surrender charges greater than \$10,000)

