First Catholic Slovak Ladies Association



INSURANCE AGENT (PRODUCER) DISCLOSURE FOR ANNUITIES (PENNSYLVANIA EXHIBIT A)

Do Not Sign Unless You Have Rea	ad and Understand the Information in this Form
Date:	
INSURANCE AGENT (PRODUC	CER) INFORMATION ("Me", "I", "My")
First Name:	Last Name:
Business/Agency Name:	Website:
Business Mailing Address:	
Business Telephone Number:	
Email Address:	
CUSTOMER INFORMATION ("You", "Your")
First Name:	Last Name:
What Types of Products Can I Se	ell You?
annuity, it means I believe that it ef	to you in accordance with state law. <u>If I recommend that You buy an</u> fectively meets Your financial situation, insurance needs, and financial s, such as life insurance or stocks, bonds and mutual funds, also may
I offer the following products:	
☐ Fixed or Fixed Indexed Annu☐ Variable Annuities☐ Life Insurance	nities
	ovide advice about or to sell non-insurance financial products. I have financial products that I am licensed and authorized to provide advice
☐ Mutual Funds☐ Stocks/Bonds☐ Certificates of Deposits	

Whose Annuities Can I Sell to You?

I am authorized to sell:	
☐ Annuities from Only One (1) Insurer	☐ Annuities from Two or More Insurers
☐ Annuities from Two or More Insurers although I primarily sell annuities from:	
How I'm Paid for My Work:	
It's important for You to understand how I'm paid for my w You purchase, I may be paid a commission or a fee. Commissions If You have questions about how I'm paid, please ask Me. Depen will or may be paid cash compensation as follows:	are paid to Me by the insurance company.
☐ Commission, which is an amount paid by the insurance compa	signs) of each premium paid. If other
☐ Other (Describe):	
If you have questions about the above compensation I will me.	l be paid for this transaction, please ask
I may also receive other indirect compensation resulting "noncash" compensation), such as free or reduced-cost training coverage, advertising incentives and support, bonuses and sales the insurance company or other sources.	, continuing education courses and E&O
By signing below, you acknowledge that you have read and us in this document.	nderstand the information provided to you
Customer Signature	
Date	
Agent (Producer) Signature	
Date	

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CONSUMER REFUSAL TO PROVIDE INFORMATION PENNSYLVANIA EXHIBIT B

Do Not Sign Unless You Have Read and Understand the Information in this Form

Why are you being given this form?

Statement of Purchaser:

You're buying a financial product – an annuity.

To recommend a product that effectively meets your needs, objectives and situation, the agent, broker, or company needs information about you, your financial situation, insurance needs and financial objectives.

If you sign this form, it means you have not given the agent, broker, or company some or all the information needed to decide if the annuity effectively meets your needs, objectives and situation. You may lose protections under the Insurance Code of Pennsylvania if you sign this form or provide inaccurate information.

\square I REFUSE to provide this information at this time.
OR
\square I have chosen to provide LIMITED information at this time.
Customer Signature
Date

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Consumer Decision to Purchase an Annuity NOT Based on a Recommendation PENNSYLVANIA EXHIBIT C

Do Not Sign This Form Unless You Have Read and Understand It.

Why are you being given this form?

You are buying a financial product – an annuity.

To recommend a product that effectively meets your needs, objectives and situation, the agent, broker, or company has the responsibility to learn about you, your financial situation, insurance needs and financial objectives.

If you sign this form, it means you know that you're buying an annuity that was not recommended.

Statement of Purchaser:

I understand that I am buying an annuity, but the agent, broker or company did not recommend that I buy it. If I buy it **without a recommendation**, I understand **I may lose protections** under the Insurance Code of Pennsylvania.

Customer Signature		
Date		
Agent/Producer Signature	 	
Date		