



Letter of Authorization

National Guardian Life Insurance Company • P.O. Box 2867 • Clinton, IA 52733-2867
Phone 877.442.6965 • Fax 608.373.9508 • www.nglic.com

Please use this form to make your Single Premium Immediate Annuity irrevocable, non-forfeitable non-assignable and non-commutable.

To: National Guardian Life Insurance

RE: **Annuitant's
Printed Name:**

**Contract
Number:**

I hereby authorize National Guardian Life Insurance Company (NGL) to immediately make my Single Premium Immediate Annuity irrevocable, non-assignable, non-forfeitable and non-commutable. I acknowledge that is a one-time election that is completely irreversible and unchangeable once authorized. I understand and acknowledge that NGL does not offer legal, financial, tax, investment, estate, VA benefit or Medicaid planning advice; before executing this authorization, I have consulted with a knowledgeable advisor and believe this to be appropriate for my circumstances and hold NGL harmless. I understand that as a result of this authorization:

- There is no cash surrender value of the annuity, it cannot be changed, assigned or pledged/sold to anyone;
- The payee of the contract may not be changed;
- I cannot change the beneficiary(ies) of the annuity and any remaining payments that have not been paid out during my lifetime shall be payable to the beneficiary(ies) named at the time this authorization is executed.

Signed At:

City, State:

Date:

**Annuitant's
Signature:**