INSURANCE AGENT (PRODUCER) DISCLOSURE FOR ANNUITIES Do Not Sign Unless You Have Read and Understand the Information in this Form

Date:		
INSURANCE AGENT (PRODUCER) INFORMATION ("Me", "I", "My")		
First Name:	Last Name:	
Business\Agency Name:	Website:	
Business Mailing Address:		
Business Telephone Number:		
Email Address:		
National Producer Number in Oregon:		
CUSTOMER INFORMATION ("You", "Your")		
First Name:	Last Name:	

What Types of Products Can I Sell You?

I am licensed to sell annuities to You in accordance with state law. <u>If I recommend that You buy an annuity, it means I believe</u> that it effectively meets Your financial situation, insurance needs, and financial objectives. Other financial products, such as life insurance or stocks, bonds and mutual funds, also may meet Your needs.

I offer the following products:

- □ Fixed or Fixed Indexed Annuities
- $\hfill\square$ Variable Annuities
- □ Life Insurance

I need a separate license to provide advice about or to sell non-insurance financial products. I have checked below any non-insurance financial products that I am licensed and authorized to provide advice about or to sell.

- □ Mutual Funds
- $\hfill\square$ Stocks/Bonds
- $\hfill\square$ 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 work. Depending on the particular annuity You purchase, I may be paid a commission or a fee. Commissions are generally paid to Me by the insurance company while fees are generally paid to Me by the consumer. If You have questions about how I'm paid, please ask Me.

Depending on the particular annuity You buy, I will or may be paid cash compensation as follows:

- □ Commission, which is usually paid by the insurance company or other sources. If other sources, describe:
- □ Fees (such as a fixed amount, an hourly rate, or a percentage of your payment), which are usually paid directly by the customer.
- □ Other (Describe):

If You have questions about the above compensation I will be paid for this transaction, please ask me.

I may also receive other indirect compensation resulting from this transaction (sometimes called "non-cash" compensation), such as health or retirement benefits, office rent and support, or other incentives from the insurance company or other sources.

What duty of care do I owe You, the customer?

- \Box Fiduciary Required to act only in the consumer's best interest.
- □ Disclosure and Care under Chapter 143, 2023 Laws, Section 2 Required to exercise reasonable skill, diligence, and care in recommending annuity products and disclose conflicts of interest.
- □ I have provided You with a written copy of the annuity recommendation, including the basis of how it was determined that the recommended product best meets your financial situation, insurance needs, and financial objectives.

By signing below, You acknowledge that You have read and understand the information provided to You in this document.

Customer Signature

Date

Agent (Producer) Signature

Date