



Annuity Quote Request Form

Agent Name _____

Best way to be reached (please check box)

Email: _____ Phone: _____

Client's Name: _____ Client's State: _____

Date of Birth: _____

Client's Goals: _____

Amount to Quote: \$ _____ Qualified Funds Non Qualified Funds

If Qualified Money, please list what type of qualified account:

Approximate percentage of quote amount compared to total liquid assets: _____

Type of product(s) you are interested in (check all that apply)

Single Premium Immediate Annuity (SPIA) Fixed Indexed Annuity Multi-Year Guaranteed Annuity

Is there a specific company you would like to see? _____

FOR FIAs ONLY

Would you like to see an income rider (check one) YES NO Preferred Surrender Period (years) _____

FOR MYGAs ONLY

Rates can vary by carrier rating quite a bit. If you wish to have a certain carrier rating please state here

A++ A+ or better A or better A- or better B++ or better

FOR SPIAs ONLY

What type of payout (check all that apply)

Life Only Life with Cash Refund Life with Installment Refund Joint Life

If you would like joint life SPIA quote, please list spouse Name and DOB

Additional Comments:

*Please note prior to selling any annuity you must take the carrier's product specific training and be contracted. The product training requirements are in addition to your state CE annuity training requirements (which also must be up to date). Any application sent in without these requirements will not be accepted.