

POLICY EVALUATION PROGRAM

REQUEST FOR IN-FORCE POLICY ILLUSTRATION

Insurance Carrier: _____

Owner: _____

Insured(s): _____

Policy Number: _____

SSN or Tax ID #: _____

Please provide the following information for the insurance policy or policies listed above based on current assumptions:

- 1. In-force illustration at current premium schedule
- 2. In-force illustration showing minimum premium to endow
- 3. Policy cost basis
- 4. Other _____

Please forward the requested information to: _____

Policy Owner/Trustee Signature

Policy Owner/Trustee Signature

Date

Street Address

City

State

ZIP

All guarantees subject to the claims paying ability of the issuing insurer.

The Policy Evacuation Program is a complimentary service offered by CBS brokerage through some of the top financial service professionals in the country to assist consumers in analyzing their existing insurance policies. It is not a program designed to encourage consumers to replace existing insurance policies.

For Insurance Professional Use Only. Not intended for use in solicitation of sales to the public. Not intended to recommend the use of any product or strategy for any particular client or class of clients. For use with non-registered products only. Products and programs offered through CBS are not approved for use in all states.