



**AMERICAN SAVINGS LIFE INSURANCE COMPANY**  
935 E. Main Street, Mesa, Arizona 85203-8849  
(480) 835-5000 | (800) 880-2112  
www.AmericanSavingsLife.com

## Non-Investment Advice and Advertising Acknowledgments

I acknowledge that during the American Savings Life Insurance Company (ASLIC) product presentation and discussions regarding my financial situation that the below named agent did not advise me, suggest to me, encourage me, or persuade me to sell my securities, surrender my securities-related life insurance policies or annuities, or liquidate any other investments to purchase the annuity applied for. ASLIC is not in a fiduciary capacity in this transaction nor enters into any fiduciary relationship with any of its independent agents or producers, prospective customers, policyholders or contract owners.

I further acknowledge that any decision I may have made to exchange, terminate, or sell any of my existing investments were made by me after careful review of any penalties or surrender charges associated with those investments and the consideration of my investment objectives and financial needs.

Neither American Savings Life Insurance Company nor any of its representatives/agents/producers may provide tax or legal advice on behalf of our company. Individuals should consult their tax advisor or legal counsel for specific advice and information regarding their individual situation.

I have other sources of income to provide for my daily living needs and enough additional savings for emergency cash needs. I believe that this product purchase is appropriate based on my financial situation and goals.

X \_\_\_\_\_  
Owner Signature & Date

\_\_\_\_\_  
Joint Owner Signature & Date (if applicable)

\_\_\_\_\_  
Owner Printed Name

\_\_\_\_\_  
Joint Owner Printed Name (if applicable)

## Agent Acknowledgments

I acknowledge that during the American Saving Life Insurance Company (ASLIC) sales presentation and my discussion with the above client regarding their financial status, that I did not advise, suggest to, encourage, or persuade them to sell their securities, or surrender their securities-related life insurance policies or annuities, or liquidate any other securities related investments to purchase the annuity or life insurance applied for.

Based on the information disclosed to me by the applicant, my recommendation of this product is reasonably suited to fulfill the applicant's needs. I have recorded the applicant's needs analysis information, which formed the basis for my recommendation, and I will make this information available to ASLIC in the event it is needed.

I certify that I have only used advertisements and sales materials that have been formally pre-approved by ASLIC to use in the sale of any products. If otherwise, I have attached to this form any materials, illustrations, demonstrations, or other forms that were used and I am describing those items here:

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Agent Printed Name

\_\_\_\_\_  
ASLIC Agent #

\_\_\_\_\_  
Date