



Multi-Year Guaranteed Annuity (MYGA)

American Savings Life Insurance Company
 935 E. Main Street, Mesa, Arizona 85203-8849
 (480) 835-5000 | (800) 880-2112
 www.AmericanSavingsLife.com

MYGA – Agent Checklist & Application Coversheet

This checklist is required along with the original application paperwork

Owner Name(s): _____

The following original signed documents are required:

- Annuity Application (Form 3010)
- Annuity Disclosure Statement (Form 3020)
- U.S. Patriot Act Notification and Customer ID Verification (Form 1524)
- Annuity Products Suitability Analysis (Form 1530)
- Non-Investment Advice and Advertising Acknowledgement (Form 1775)

If applicable, the following original signed documents may be required:

- Check payable to American Savings Life Insurance Company for the initial premium amount, or
- Bank Authorization for Single Premium Payment (Form 1585), or
- IRA / Qualified Account Transfer (Form 1535), or
- IRC 1035 Exchange / Non-Qualified Transfer (Form 1770)
- Replacement of Annuity (Form 2050)
- Additional Beneficiaries to add to the annuity application (Form 1514)
- Applicant Age 80+ Senior Suitability Acknowledgement (Form 1780)
- Annuity Systematic or Partial Withdrawal – Interest Only or Specified Amount payouts (Form 1594)
- Required Minimum Distribution (RMD) Withdrawal Request (Form 1594)
- If the Beneficiary or Owner is a Trust – include the Certification of Trust (Form 1512)

For a 1035 Exchange or IRA Transfer include a copy of the applicant’s most recent account statement.

Agent Acknowledgement: I submit the above indicated documents and have left with the client copies of the Disclosure Statement, Annuity Buyer’s Guide & any other ASL approved information, materials or brochures.

If there will be a commission split on this application, both agents will need to sign this form and be contracted with ASL. Otherwise, 100% of the commission will be paid to the primary agent of record (i.e.: agent who signed the application).

X			%
Primary Agent Signature (Agent of Record)	Agent Name	ASL Agent #	Commission split
Secondary Agent Signature (if applicable)	Agent Name	ASL Agent #	Commission split

Agent Comments: _____