



## Annuity Withdrawal Service Form

Owner's Name \_\_\_\_\_ Owner's Date of Birth \_\_\_\_\_  
Contract # \_\_\_\_\_ Social Security # \_\_\_\_\_  
Phone # ( ) \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip

Please return completed pages 1 & 2 to AAA Life Insurance Company for processing. After reading page 3, please place with your important Annuity contract papers.

*Surrender charges may apply if more than 10% is withdrawn per contract year during the surrender charge period.*

### Reason for Withdrawal – Choose One:

- Normal Distribution, age 59 ½ or older
- Early Distribution, under age 59 ½ (possible tax consequences)
- Disability, under age 59 ½
- Distribution due to death
- Distribution from a Rollover IRA to a qualified plan

### Withdrawal Instructions – Choose One:

- I request 10% of the Accumulation Value be withdrawn from my Annuity
- I request that interest only be withdrawn from my Annuity
- I request that the amount of \$ \_\_\_\_\_ or \_\_\_\_\_ % be withdrawn from my Annuity

### Additional Information Needed for Systematic Withdrawals ONLY

#### Select Frequency of Payment – Choose One

- One-Time  Monthly  Quarterly  Semi-Annually  Annually
- Beginning Date and Month of Payment \_\_\_\_\_
- I would like to receive funds on or about the \_\_\_\_\_ (date)

*Please note that we are unable to guarantee an absolute date due to circumstances that we do not control.*

### Full Surrender

Surrender the above contract for the Accumulation Value minus the appropriate surrender charge if applicable:

- Send all funds to the owner (above) at the address on file
- Transfer all funds to a new Annuity with AAA Life Insurance Company
- Transfer \$ \_\_\_\_\_ to a new Annuity with AAA Life Insurance Company and send the balance to me

# Aaa Auto Insurance Declaration Page

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