



IRA MINIMUM DISTRIBUTION WITHDRAWAL

Please withdrawal my IRA minimum distribution on a yearly basis beginning with my next distribution and continuing until further written notice.

I would like to receive my distribution annually on the 1st of:

(Please check one month only)

_____ January

_____ July

_____ February

_____ August

_____ March

_____ September

_____ April

_____ October

_____ May

_____ November

_____ June

_____ December

Please withhold _____ for Federal Income Tax. (If you would like FIT withheld, please indicate a percentage.)

Annuity Contract #: _____

Name _____

Address _____

City, State, Zip Code _____

Phone () - _____

Social Security #: - - _____

I understand that it is still my responsibility to make sure that I have received my minimum distribution each year.

(Signature of Annuitant)

Date / / 20 _____