

Client Data Form

Proposed Insured Information

Name: Ahroush Nadeeb Gender: Female

DOB: February 16, 1999 SSN/TIN#: 123456789

Address: 2709 Piedmont Ave Apt 12 Los Angeles Ca 91020

Tel: 213-448-4246 Years at this Address: 4

Email: bchong12@g.ucla.edu

Driver License#: 123456789 Exp: February 16, 1999 State: Massachusetts

Is the Insured a US citizen? Yes If no, permanent resident/visa copy is required

Employer: Blue Anchor Insurace Start Date: March 19, 2006

Address: 2709 Piedmont Ave Apt 12 Los Angeles Ca

Occupation: NBA Basketball Player Duties: To play basketball professionally

Annual Income: 100000000 Annual Household Income: 1000000000

Net Worth: 1000000000

Application Information

Product Type/Name: life insurace Coverage Amount: \$200000

Class Rating: preferred plus Planned Premium: \$1000000

Term Years: 30 Replacement: yes

Purpose Of Insurance: rider

Riders: LTC/Chronic Illness: critical Living Benefits: living

Lifetime Income Rider: yes Other Rider: yes

Existing/Pending Coverage

Carrier	Face Amount	Policy Number	Issue Year	Surrender Value	Owner
<u>Blue Anchor</u>	<u>1213124234</u>	<u>4523542345</u>	<u>2009</u>	<u>12343432</u>	<u>Lou Gehrig</u>
<u>Travelers</u>	<u>52345346</u>	<u>234523452</u>	<u>2003</u>	<u>45345653</u>	<u>Brad Stevens</u>

Using funds from existing policies to pay premiums due on the new policy? Yes
If yes, transfer/1035 form required

Beneficiary Information

Primary Beneficiary

Name: Branden

Date of Birth: February 16, 1999

SSN#: 123456789

Relationship: Mother

Name: Branden

Date of Birth: February 16, 1999

SSN#: 123456789

Relationship: Brother

Contingent

Name: Branden

Date of Birth: February 16, 1999

SSN#: 123456789

Relationship: Brother

Name: Branden

Date of Birth: February 16, 1999

SSN#: 123456789

Relationship: Mother

Health Information

Height: 5'10 Weight: 190lb Tobacco: no If Yes, This guy smokes hard

Abnormal blood pressure or Cholesterols? Yes

If yes, please describe: yes sir ski

Diabetes? yes

If yes, please describe: He ate alot of food and got fat

Any history of surgery or treatment? Yes.

If yes, please describe: This dude had surgery. Lots of it

List any medication you currently are taking

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Immediate Family Medical History

	Age if Living	Age at Death	Cause of Death
Father	<u>10</u>	<u>20</u>	<u>Sleep</u>
Mother	<u>40</u>	<u>50</u>	<u>Pneumonia</u>
Brother/Sister	<u>10</u>	<u>20</u>	<u>Influenza</u>

Driving History

Any moving violation/DUI/license suspension in the past 3 years?

If yes, please describe: This guy had a DUI smh

Primary Care Physician

Name: Branden Tel: 213-448-4246

Address: 2709 Piedmont Ave Apt 12 Los Angeles, Ca

Date Last Visited: February 16, 1999

Reason and Result: What Reason is there for this man

Bank Information

Bank Name: Hanmi Bank Address: 120 S. Western Ave Los Angeles, CA 90004

Routing#: 1234567890 Account#: 12343456789

Owner Name: Paul Kim DOB: February 16, 1999 SSN: 123456789

Address: 120 S. Western Ave Los Angeles, CA 90004 Tel: 2138412927

Medical Exam Information

Exam Scheduled Date: February 16, 1999

Examiner: Paul Kim Ahn yoon

NOTES

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