

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 1 - Home Office Copy

LSA APR

LNL0974 1208

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 1 - Home Office Copy

LSA APR

LNL0974 1208

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 2 - Customer Copy

LSA APR

LNL0974 1208

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 2 - Customer Copy

LSA APR

LNL0974 1208

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 3 - Sales Representative Copy

LSA APR

LNL0974 1208

# Liberty National

Life Insurance Company



3700 SOUTH STONEBRIDGE DRIVE • POST OFFICE BOX 8080 • MCKINNEY, TEXAS 75070-8080

## ADDITIONAL PREMIUM RECEIPT

Please apply these funds to my existing Flexible Premium Annuity.

Annuitant Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Annuity # \_\_\_\_\_ Additional Amount: \$ \_\_\_\_\_ (minimum \$50.00)

Is this an IRA annuity? ☐ Yes ☐ No If yes, additional amount is for tax year \_\_\_\_\_  
(If no tax year is specified, funds will be applied for current tax year.)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Signature

Page 3 - Sales Representative Copy

LSA APR

LNL0974 1208