

REV 09-11

Contract Number

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**IV. Consumer Feedback (Must be completed.)**

Our company is committed to providing superior products and services. Knowing the reasons for your surrender will help us develop and provide improved products and services to our contract holders.

- ☐ A) I need use of the money. ☐ B) I intend to place funds with another financial institution.
- ☐ C) Dissatisfied with current interest rates. ☐ D) Dissatisfied with the service received from your agent.
- ☐ E) Dissatisfied with the service from the Home Office. ☐ F) Other: \_\_\_\_\_

Please indicate the name of the agent or representative assisting you with this request: *(Must be completed and printed or typed.)*

\_\_\_\_\_

\_\_\_\_\_

**V. Election of Withholding (Must be completed.)**

You must indicate if Federal/State income taxes should be withheld from your payment by signing and dating this election form and returning in to Midland National Life Insurance Company. State taxes will be withheld only if required by your state. Even if you elect not to have Federal/State income taxes withheld, you are liable for Federal/State income taxes on the taxable portion of your benefits. You may also be subject to tax penalties under the Estimated Tax Payment rules if your payments of estimated tax and withholding, if any, are not adequate. **If no election is made, we are required to withhold Federal Tax at a rate of 10%.**

- ☐ I do NOT want Federal/State income taxes withheld from my payment.
- ☐ I do want Federal/State income taxes withheld from my payment. ☐ Federal 

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 % ☐ State 

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**TAXPAYER IDENTIFICATION NUMBER (TIN):**Social Security Number 

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 or Employer Identification Number 

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**JOINT TAXPAYER IDENTIFICATION NUMBER (TIN):**Social Security Number 

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 or Employer Identification Number 

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Certification - Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) , and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. Person.

Owner Signature/Assignee: \_\_\_\_\_ Date: \_\_\_\_\_

Joint Owner Signature/Assignee: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

(Required in the following community property states: AZ, CA, ID, LA, NM, NV, TX, WA, or WI), or check here ☐ Not Married if applicable

Notary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(A notary signature is needed for all surrender charges greater than \$10,000))



