

In Home Meeting Disclosure for Applicants Age 65 and Older

Agent Name (print name as it appears on your California insurance license)
License Number (if applicable)
Mailing Address (print address as it appears on your California insurance license)
Telephone Number

I am a licensed insurance agent. My purpose for coming to your home is to sell, discuss, and/or deliver life insurance and annuities.

You have the right to have other persons present at the meeting, including family members, financial advisors or attorneys. You have the right to end the meeting at any time.

You have the right to contact the Department of Insurance for information, or to file a complaint.

CALIFORNIA DEPARTMENT OF INSURANCE In California: (800) 927-HELP (4357) / Outside California: (213) 897-8921 TDD-Telecommunication Devices for the Deaf: (800) 482-4833

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The following individuals will be coming to your home:

1. Name Printed	
Insurance License Information (if applicable)	Title
2. Name Printed	
Insurance License Information (if applicable)	Title
3. Name Printed	
Insurance License Information (if applicable)	Title
4. Name Printed	
Insurance License Information (if applicable)	Title

Delaware Life Insurance Company is authorized to transact business in all states (except New York), the District of Columbia, Puerto Rico and the U.S. Virgin Islands and is a member of Group One Thousand One.