

Sales Illustration Certification/ Acknowledgement

Massachusetts Mutual Life Insurance Company 1295 State Street, Springfield, MA 01111-0001

Use this form to satisfy sales illustration certification and acknowledgement requirements for products where an illustration is required in Massachusetts. 1. Policy Number(s): 2. Proposed Insured 1 full legal name (First, MI, Last, Suffix): 3. Proposed Insured 2 full legal name (If applicable): ___ 1. I, the undersigned acknowledge that a hard copy of a sales illustration matching the Policy as issued must be provided no later than delivery of the Policy. Select one of the following that confirms how, or if, an illustration was used in the sale of this Policy. ☐ No illustration was used in the sale of this life insurance policy. ☐ The sales illustration used for the Proposed Insured does not conform to the policy as applied for. ☐ The sales illustration for the Proposed Insured was shown to me on a computer screen. It conforms to the Policy as applied for, however, no hard copy was furnished. If selected, complete section C. Complete the following table for each Insured where applicable. **Proposed Insured Information** Insured 2 ☐ Male ☐ Female ☐ Male ☐ Female Gender (Select one): Insurance age: Underwriting or risk class illustrated: Type of policy applied for: Initial death benefit: Dividend option selected (If applicable): Signature of Proposed Policy Owner: Printed name: ______ Date: _____ Title (If applicable): Printed name of Corporation, Partnership or Trust (If applicable): Signature of Proposed Policy Owner 2 (If applicable): Printed name: ____ Date: Title (If applicable): Printed name of Corporation, Partnership or Trust (If applicable): Signature of Soliciting Producer: Printed name: Date:

MassMutual Financial Group is a marketing name for Massachusetts Mutual Life Insurance Company (MassMutual) and its affiliated companies and sales representatives.