

Certificate Loan Request Form

Certificate number:

Purpose of this form	Use this form to request a cash loan from your Certificate.
Terms used in this form	<i>Foresters Financial™, Insurer or We</i> mean The Independent Order of Foresters. <i>You or your</i> mean the Owner who is completing and signing this form, unless otherwise specified. <i>Certificate</i> means a Certificate issued by an Insurer. <i>Owner</i> includes Certificate Owner and Absolute Assignee. <i>Social Security Number</i> will be known as SSN and <i>Tax Identification Number</i> will be known as TIN.

1. Owner Information

Information about the Certificate Owner	<p>If the Insured was a minor at issue and is now the current Owner, we will require a copy of government ID (Driver's License, Passport or notarized signature) to accompany this request, unless it has been previously provided. This will ensure that there are no delays in processing.</p> <p>Owner Name (first, middle initial & last) SSN/TIN</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"><input style="width: 95%; height: 20px;" type="text"/></div> <div style="width: 35%;"><input style="width: 95%; height: 20px;" type="text"/></div> </div> <p>Address Date of Birth (mm/dd/yyyy) Primary Phone Number</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 33%;"><input style="width: 95%; height: 20px;" type="text"/></div> <div style="width: 20%;"><input style="width: 95%; height: 20px;" type="text"/></div> <div style="width: 20%;"><input style="width: 95%; height: 20px;" type="text"/></div> </div>
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2. Payment Instructions

Please choose one of these two options. If no choice is made, Foresters Financial will mail the check to the address on file.	<p><input type="radio"/> Check mailed to the Owner's current address on file</p> <p><input type="radio"/> Electronic Funds Transfer (Direct Deposit)</p> <p style="margin-left: 20px;">Please note, the Electronic Funds Transfer (EFT) option is only available if you are the current Owner/Assignee and Payor and currently paying your premium on a Pre-Authorized Checking Plan (PAC).</p>
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3. Loan Request

Please complete this section if you are requesting a cash loan from the cash value of your Certificate.	<p><input type="radio"/> Maximum available loan amount</p> <p><input type="radio"/> I request a cash loan in the amount of: \$ <input style="width: 100px;" type="text"/></p> <p>If the actual amount of the loan requested exceeds the maximum available, then only the maximum available loan amount will be granted.</p> <p>We encourage you to set up a scheduled loan repayment plan to control the amount of interest accrued and applied towards the cash value of your Certificate to control the amount of the debt.</p>
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4. Replacement Declaration

Failure to complete this section may delay the processing of your request.	<p>a) Have you purchased a new Foresters Financial product in the last 13 months? <input type="radio"/> Yes <input type="radio"/> No</p> <p>b) Will the funds from this request be used to pay premiums on a new or an existing Foresters Financial certificate? <input type="radio"/> Yes <input type="radio"/> No</p> <p>c) Will the funds from this request be used to pay premiums on a new or existing insurance or annuity product with another company? <input type="radio"/> Yes <input type="radio"/> No</p>
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5. Withholding Tax

	<p>There may be federal and state income tax consequences associated with taking a loan against your certificate. Foresters Financial representatives do not provide tax advice. Please consult your tax advisor to understand the potential implications of taking out a loan against your coverage.</p> <p>If eligible, please check the appropriate option:</p> <p><input type="radio"/> Withhold federal and state income tax</p> <p><input type="radio"/> Do not withhold federal and state income tax</p> <p>If no choice is made, Foresters Financial will withhold the applicable federal and state withholding taxes from the taxable portion of the payment, if any.</p> <p>Under penalties of perjury, by signing below, I certify that:</p> <ol style="list-style-type: none"> The Social Security Number on this form is my correct taxpayer identification number; I am not subject to backup withholding due to failure to report interest and dividend income; I am a US person (including a US resident alien); and I am exempt from Foreign Account Tax Compliance Act (FATCA) reporting. <p>You must cross out item (b) above if you have been notified by the IRS that you are currently subject to backup withholding. You must cross out item (c) if you are not a US person (including a US resident alien).</p> <p>Owner's Signature</p> <div style="display: flex; align-items: flex-start;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px; width: 250px; height: 20px; text-align: center; font-size: 24px; font-weight: bold;">X</div> <div style="border-top: 1px solid black; width: 250px; height: 20px;"></div> </div> <p style="margin-left: 20px;">Continue to page 2 for additional signatures; failure to sign page 2 will result in our inability to process your request.</p>
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Certificate Loan Request Form (continued) Certificate number:

6. Agreements and Authorizations

Please review this section before signing.

I, the Owner, certify that the information provided is true, correct and complete. I understand that any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim containing any materially false information commits an act of fraud, and is subject to criminal and civil penalties. Additionally I understand that:

- This request is not valid unless all pages have been completed and submitted.
- Any corrections to this form must be initialed by all signing parties.
- Foresters Financial is requested to grant a loan for the amount stated or the maximum loan amount available, whichever is less, subject to the terms of the Certificate.
- The current beneficiary must sign to release his or her rights if he or she is an Irrevocable Beneficiary.
- The current assignee must sign to acknowledge the loan and its potential impact to the death benefit.

In consideration for granting this loan, I have read, understand and agree that:

1. All outstanding indebtedness will be consolidated and will form part of the loan requested. All outstanding amounts for principal and accrued interest will constitute indebtedness under the Certificate.
2. The Certificate, together with any Certificate or Certificates that may be issued in substitution therefore and all monies at any time payable in connection therewith are hereby assigned to Foresters Financial as security for the loan.
3. Subject to the provisions of the entire contract, if at any time the indebtedness secured by the Certificate exceeds the cash value, the Certificate will terminate and all liability of Foresters Financial under the Certificate will immediately terminate.
4. Interest on the loan will be charged as described in the Certificate. Any existing indebtedness and any premium(s) that is/are due and unpaid will also be added to the amount of a new cash loan and will incur interest. If a current premium was recently remitted, this information should be submitted with the loan request.

7. Signature Section

Printed name and signature are both required.

If the Owner, Irrevocable Beneficiary or Collateral Assignee is a company, please submit a letter of direction on company letter head along with this request authorizing this transaction.

Owner - Print name <input style="width: 95%; height: 20px;" type="text"/>	Signature of Owner <input style="width: 95%; height: 20px; text-align: center;" type="text" value="X"/>	Date (mm/dd/yyyy) <input style="width: 95%; height: 20px;" type="text"/>
I, the Irrevocable Beneficiary, consent to the loan and understand that it may impact the amount of the death benefit payable.		
Beneficiary - Print name (If applicable) <input style="width: 95%; height: 20px;" type="text"/>	Signature of Beneficiary <input style="width: 95%; height: 20px; text-align: center;" type="text" value="X"/>	Date (mm/dd/yyyy) <input style="width: 95%; height: 20px;" type="text"/>
I, the Collateral Assignee, consent to the loan and understand that it may impact the amount of the death benefit payable.		
Assignee - Print name (If applicable) <input style="width: 95%; height: 20px;" type="text"/>	Signature of Assignee <input style="width: 95%; height: 20px; text-align: center;" type="text" value="X"/>	Date (mm/dd/yyyy) <input style="width: 95%; height: 20px;" type="text"/>