

# 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	Foresters Financial <sup>™</sup> , Insurer or We mean The Independent Order of Foresters. You or your mean the Owner who is completing and signing this form, unless otherwise specified. Certificate means a Certificate issued by an Insurer. Owner includes Certificate Owner and Absolute Assignee. Social Security Number will be known as SSN and Tax Identification Number will be known as TIN.			
1. Owner Informat	ion			
Information about the Certificate Owner If the Insured was a minor at issue and is now the current Owner, we will require a copy of government Passport or notarized signature) to accompany this request, unless it has been previously provided there are no delays in processing.				
	Owner Name (first, middle initial & last)	SSN/TIN		
	Address	Date of Birth (mm/dd/yyyy) Pri	mary Phone Number	

### 2. Digital Disbursement Payment Information (Optional)

FOR ELECTRONIC PAYMENTS ONLY.	If you provide an email address below, and if there are any monies owing to you as a result of this transaction, you will receive 2 emails as follows:
Do not complete this	(1) An email from Foresters confirming your transaction has been processed and
section if you wish to be paid by check.	(2) An email from notification@thepaychoice.com to select the payment method for receiving your funds electronically.
	Email
MyPayChoice is a digital disbursement platform that allows you to accept payments electronically.	Note that you may be contacted by Foresters, before receiving the emails, to confirm your request.
	Foresters may correct and/or debit your account in the amount of any overpayment, duplicate payment, or otherwise erroneous payment.
	If you do not provide your email address, Foresters will send you a check if applicable.

## 3. Loan Request

Please complete this section if you are requesting a cash loan from the cash value of your Certificate.	Maximum available loan amount I request a cash loan in the amount of: If the actual amount of the loan requested exceeds the maximum available, then only the maximum available loan
	amount will be granted. 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.

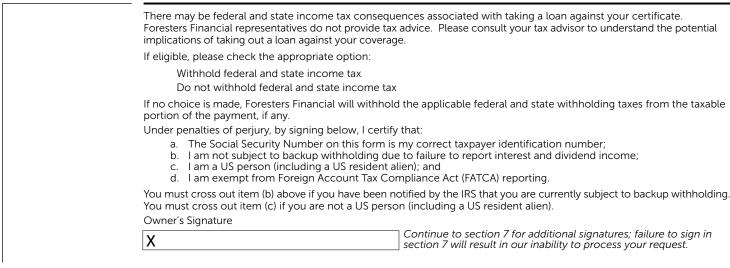
### 4. Replacement Declaration

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

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## Certificate Loan Request Form (continued) Certificate number:

#### 5. Withholding Tax



## 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:
	<ul> <li>This request is not valid unless all pages have been completed and submitted.</li> </ul>
	<ul> <li>Any corrections to this form must be initialed by all signing parties.</li> </ul>
	<ul> <li>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.</li> </ul>
	<ul> <li>The current beneficiary must sign to release his or her rights if he or she is an Irrevocable Beneficiary.</li> <li>The current assignee must sign to acknowledge the loan and its potential impact to the death benefit.</li> </ul>
	<ul> <li>By providing my email address, I agree that I will receive funds electronically from notification@thepaychoice.com.l hereby specifically authorize Foresters to correct and/or debit my account in the amount of any overpayment, duplicate payment, or otherwise erroneous payment.</li> </ul>
	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.	Owner - Print name	Signature of Owner	Date (mm/dd/yyyy)	
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.	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)	Signature of Beneficiary	Date (mm/dd/yyyy)	
		X		
	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)	Signature of Assignee	Date (mm/dd/yyyy)	
		X		
			-	

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