

Home Office: 211 N Broadway Edmond, OK 73034 Phone (866) 708-2335 Fax (405) 286-2770 attorneys@evansdavis.com

ATTN: _	
	FAX RESPONSE TO: attorneys@evansdavis.com, (405) 286-2770
ТО:	
COMPANY:	
Illustr	ation and Policy Information Request Attached signed by owner
Policy	Insured
Т	OTALNUMBER OF PAGES:

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IN-FORCE LEDGER REQUEST

To: Policy Services/Customer Service Department			
Insurance Company Name:	Policy #		
Insured Name(s):	DOB:	Last 4 digits of SSN:	
Policy Owner Name(s):			
Policy Owner Address:			

Dear Policy Services:

As the owner of the above referenced policy, I hereby request you to provide my estate planning attorney with any and all information about my life insurance policies. For the initial review please provide the following in-force ledger(s) with the understanding that additional in-force ledgers may be required:

 \Box Original "as sold" illustration

□Illustration based upon values and premiums schedule

 \Box Illustration based upon current proceeds, showing minimum premiums required to maintain my policy in-force to policy maturity under policy's guaranteed assumptions

□Illustration based upon current proceeds, showing minimum premiums required to maintain my policy in-force to policy maturity under current cost assumptions and interest/dividend assumptions

 \Box Please use gross hypothetical rate of return of 4%

□Illustration based upon guaranteed interest rates

□Other:_____

In addition to the above information, please provide policy's income tax basis.

We would also like to confirm the **OWNER**, **BENEFICIARY**, **PAYER** and **APPLICANT** for **EACH** policy. Please send the requested information to the following via email or fax.

Evans & Davis PLLC 211 N Broadway Edmond, OK 73034

EMAIL: attorneys@evansdavis.com FAX: (405) 286-2770

If you are unable to send this information to Evans & Davis on my	behalf, please forward it directly to my address of
record.	
Owner's Signature:	Date:
Owner's Signature:	Date: