(PUT YOUR LETTER HEAD HERE)

1. Source of Funds.

I have made a decision to liquidate all or part of my securities portfolio and use the proceeds to purchase life insurance or annuity products offered by (Company Name) and Annuity Company (Company Name). I acknowledge that neither (Company Name) nor (Company Name) agents, representatives, nor employees have suggested I liquidate securities, or otherwise provided any investment advice or recommendations related to any securities liquidation. I have been advised to discuss the liquidation of securities with a properly registered investment advisor or registered representative of a broker/dealer.

2. Broker Charges and Surrender Fees.

I understand that in liquidating certain securities holdings, the broker/dealer or the securities product may assess charges, fees or surrender charges in connection with any liquidation transaction. I have been advised to consult with the liquidating broker/dealer regarding any questions or concerns I may have concerning my request for liquidation of securities and the impact of any charges or fees on liquidation.

3. Tax Consequences.

I understand that certain securities holdings I have instructed my broker/dealer to liquidate may be subject to capital gains taxes, or similar taxes, and that I am responsible for the tax consequences of these transactions. I have been advised to consult with my broker/dealer and/or tax adviser regarding the impact of the liquidation of certain securities.

4. Role of Insurance Agent.

I understand and acknowledge that the Aviva insurance agent that solicited me for an *(Company Name)* or annuity policy served solely as insurance agent for Aviva and is not licensed to sell securities or offer any investment advice regarding my securities portfolio.

5. Seek advice of other professionals.

I acknowledge that the *(Company Name)* insurance agent has advised me that I should consult with a registered investment advisor or other qualified professional licensed in the securities industry regarding my securities portfolio if I have any questions or concerns regarding my securities portfolio. Execution. By signing below, I acknowledge that I have read and fully understand this information and that I have received a duplicate copy of this Disclosure.

Owner's Signature:	_
Spouse/Jt. Owner (if applicable):	
Agent Signature:	_
Date:	