



Federal Life Insurance Company
P.O. Box 147, Lincolnshire, IL 60069
800-233-3750
www.federallife.com

Life Withdrawal Request

Section A: Contract Information

1. Contract Number	2. Insured's Full Name	3. Owner's Full Name (if different than insured)
4. Delivery instructions – mail my check to: ☐ Current Address of Record ☐ Update my Address of Record to the following:		5. Select a transaction type: ☐ Full Surrender (coverage will terminate) ☐ Loan – maximum available ☐ Loan – specific amount: \$ _____ ☐ Partial withdrawal – maximum available ☐ Partial withdrawal – specific amount: \$ _____

Section B: Loan Request (skip this section if you are not requesting a loan)

6. **Please review the following statements and confirm your understanding by checking the box below.**

☐ I agree to use the Policy listed above as collateral for the requested loan. I also agree to pay interest on the loan as outlined in the Policy's loan provisions (typically 8%). If any interest is not paid when due, it will be added to the loan balance and will accrue interest at the same rate.

If the total amount owed on the policy—including this loan and any unpaid interest—ever equals or exceeds the policy's cash surrender value, the cash value will be used to pay off the debt and the policy will automatically terminate.

If the contract proceeds mature as a death claim or otherwise, any outstanding loan balance will be deducted from the proceeds. You may repay the loan, in full or in part, at any time before the insured's death. By signing, you confirm that you are the only party with an interest in the policy, that you are not involved in any bankruptcy or insolvency proceedings, and there are no federal tax liens against you.

Finally, if the policy is classified as a Modified Endowment Contract (MEC) under the 1988 Technical and Miscellaneous Revenue Act, any withdrawals or distributions that exceed what you have paid into the policy may be taxable and could be subject to Federal Income Tax withholding and/or penalties.

7. **Would you like to start automatic EFT loan repayments?**

☐ Yes – \$ _____ per month* * *Note: If this policy isn't already set up with EFT payments, you must also fill out **Form L-2287**. Automatic loan repayments will not be processed without an active EFT payment method on file.*

☐ No

Section C: Partial Withdrawal Request (skip this section if you are not requesting a partial withdrawal)

8. **Please review the following statement and confirm your understanding by checking the box below.**

☐ **[Only available on Universal Life Policies]** I understand that a \$25 fee will be applied to all partial withdrawal transactions. The minimum withdrawal amount is \$1,000, and the Policy's Face Amount must be at least \$25,000. The Policy's Face Amount will be reduced by the withdrawal amount.

Section D: Surrender Request (skip this section if you are not surrendering your policy)

9. **Please review the following statement and confirm your understanding by checking the box below.**

☐ I certify that there are no existing assignments and that no petition in bankruptcy has been filed by or against me. The payment represents the full amount due under the contract. I agree that Federal Life Insurance Company is released, acquitted, and discharged from all claims and/or liabilities under this contract, if any, which may exist now or hereafter.

Section E: Signature(s)

By signing below, I certify that I am the authorized person to request and receive payment(s) from the above listed Contracts. I understand that this transaction may trigger withdrawal charges and that the amount I withdraw may involve tax consequences. I affirm that all statements made on this Life Withdrawal Request Form are true to the best of my knowledge and belief.

Owner's Signature (electronic signatures not accepted)	Printed Name	Date
Additional Signature* (Joint Owner or Spouse)	Printed Name	Date

*Spouse's signature required in AZ, CA, ID, LA, NV, NM, TX, WA, WI