

# Annuity Investors Life Supply Order Form



Distribution Partner/Agency Name: \_\_\_\_\_

Active Agent Number: \_\_\_\_\_

Attention: \_\_\_\_\_

Street Address (no P.O. Boxes): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address : \_\_\_\_\_

For expedited shipping please provide  
 Carrier name: \_\_\_\_\_ Carrier account number: \_\_\_\_\_

**After completing this form click here to email to [Supplies@gaig.com](mailto:Supplies@gaig.com) or fax the completed form to 877-208-2008.**  
 All orders and quantities are subject to company approval. Please allow up to two weeks for delivery.

**QUICK REQUEST**

We will provide you with everything you need to make the sale (Brochures and New Business Forms)

Product	State	Qty
FlexMax	_____	_____
FlexMax Plus	_____	_____
FlexMax 14	_____	_____
SingleMax Ten	_____	_____
GreatFlex 6	_____	_____

**PRODUCT BROCHURES/MATERIALS**

Product	State	Qty
FlexMax	_____	_____
FlexMax Plus	_____	_____
FlexMax 14	_____	_____
SingleMax Ten	_____	_____
IncomeSustainer Rider	_____	_____
GreatFlex 6	_____	_____

**MISCELLANEOUS MARKETING MATERIALS**

Description	Qty
Product Reference Guide	_____
Financial Strength Brochure	_____
Pocket Folder	_____
Tax Reference Sheet	_____
TSA Information Guide	_____
Understanding Annuities vs CD	_____

**GROUP PLAN MATERIALS**

Description	Qty
Qualified Plans Comparison	_____
403(b) & 457(b) Comparison	_____
Retirement Plan Estimator	_____
Offering Simple IRA ER	_____
Your Simple IRA EE	_____
Offering SEP-IRA ER	_____
Your SEP IRA EE	_____
Offering 457(b) Plan ER	_____
Your 457(b) Plan EE	_____
Offering 403(b) Plan ER	_____
Your 403(b) Plan EE	_____
ER = Employer	_____
EE = Employee	_____

**SPECIAL REQUESTS**

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