

Great American 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 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 | Tax Qual | Qty |
|---------------------|-------|----------|-------|
| American Custom 10 | _____ | _____ | _____ |
| Index Protector 7 | _____ | _____ | _____ |
| American Legend III | _____ | _____ | _____ |
| American Valor 10 | _____ | _____ | _____ |
| Safe Outlook | _____ | _____ | _____ |
| Safe Return | _____ | _____ | _____ |
| Secure American | _____ | _____ | _____ |
| SecureGain 5 | _____ | _____ | _____ |
| SecureGain 7 | _____ | _____ | _____ |
| SPIA | _____ | _____ | _____ |

PRODUCT BROCHURES/MATERIALS

| Product | State | Qty |
|---------------------|-------|-------|
| American Custom 10 | _____ | _____ |
| Index Protector 7 | _____ | _____ |
| American Legend III | _____ | _____ |
| American Valor 10 | _____ | _____ |
| Safe Outlook | _____ | _____ |
| Safe Return | _____ | _____ |
| Secure American | _____ | _____ |
| SecureGain 5 | _____ | _____ |
| SecureGain 7 | _____ | _____ |
| SPIA | _____ | _____ |

RIDER BROCHURES/MATERIALS

| Product | State | Qty |
|------------------------|-------|-------|
| Income Keeper | _____ | _____ |
| IncomeSecure | _____ | _____ |
| IncomeSustainer Plus | _____ | _____ |
| Inheritance Enhancer | _____ | _____ |
| Simple Income Option | _____ | _____ |
| Legacy Income Options | _____ | _____ |
| Stacked Income Options | _____ | _____ |

SPECIAL REQUESTS

GENERAL MARKETING MATERIALS

| Description | Qty |
|-------------------------------|-------|
| Annual Report | _____ |
| Financial Strength Brochure | _____ |
| GAIG Pocket Folder | _____ |
| GALIC Product Reference Guide | _____ |
| Tax Reference Sheet | _____ |