

Kovack Insurance Services Inc.
Fixed Index Annuity Quote Request

Version 2013.1

Kovack Agent Name: _____ Date _____

E-mail Address: _____

Client:

1. Name (specify primary applicant): _____

2. Birthday/Age: DOB (MM/DD/YYYY) / /

3. Gender: ☐ Male ☐ Female

4. State Written: _____

5. What Product(s) to run quotes for: _____

6. What Company?: _____

7. Total Premium: \$ _____

8. Additional Premium \$ _____

9. Number of years to illustrate (run for surrender period of the policies, run from issue date to current date, etc.): _____

10. Date of Issue (use the most current time period, use the earliest time period available, other-please specify): _____

11. Systematic Withdrawal:
☐ Do Not Take ☐ Withdraw % _____ ☐ Withdraw Amount \$ _____

12. Withdraw Period: Age _____ Start Date _____ End Date _____

13. Which strategy and dollar amount in each strategy (i.e. S&P500®, monthly point-to-point, etc.):

14. What are your client's goals for this money (i.e. current income, future income, wealth transfer, etc.)? _____

15. Long-term goals: _____

16. Qualified or Non-Qualified (if qualified, please specify IRA, 401K, etc.)

☐ Qualified _____ ☐ Non-Qualified

Return to Insurance@kovacksecurities.com