

1 BENEFICIARY INFORMATION

Full Legal Name	Date of Birth	Social Security Number	
Address	City	State	Zip
Phone Number	Email Address		

2 ORIGINAL OWNER INFORMATION

Full Legal Name	Date of Death	Social Security Number
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3 REDEMPTION INSTRUCTIONS

Investment Number	\$
	Redemption Amount

4 PAYMENT METHOD

Select one. Wires less than \$20,000 will be assessed a \$20 fee. Requests made after 12:00 pm will be processed the next business day. Allow up to two (2) business days for funds to post to your bank account.

 Electronic Funds Transfer (Complete authorization below.) Wire Transfer (Complete authorization below.)**5 AUTHORIZATION AGREEMENT**

This will authorize AGFinancial to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the bank account indicated below for any payments, interest, withdrawals, redemptions or otherwise, due to you or requested by you on the investment. This authorization is to remain in force until AGFinancial has received written notice of its termination in such time and in such manner as to afford it and your bank a reasonable opportunity to act on it. This authorization does not change the terms of your investment.

This will authorize the bank indicated below, to debit and/or credit the same to the investment.

Name(s) As They Appear On Your Bank Account	<input type="checkbox"/>	<input type="checkbox"/>
	Checking	Savings

Bank Account Number	Bank ABA Number (Located in bottom left corner of check.)
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Bank Name (Please print)

BENEFICIARY REDEMPTION

(continued from previous page)

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SIGNATURE

I hereby request the investment certificate redemption and payment as set forth above.

TAX INFORMATION

Under penalties of perjury, I certify that: **1)** The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); **2)** I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding; and **3)** I am a U.S. citizen or other U.S. person (defined in the instructions).

If you have been notified by the IRS that you are currently subject to backup withholding, you must cross out item 2 above.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature

Printed Name

Date