



Date \_\_\_\_\_  
TODAY'S DATE

To \_\_\_\_\_  
LIFE INSURANCE COMPANY NAME

From \_\_\_\_\_  
YOUR NAME AS IT APPEARS ON THE POLICY

Subject **Request for In-Force Projection, Policy #** \_\_\_\_\_  
YOUR POLICY NUMBER

Dear Customer Service Department:

I'm in the process of completing an insurance policy review. Please provide the following regarding the policy referenced above:

- ▶ The actual cash surrender value, death benefit, and cost basis information as close to the date of this letter as is possible.
- ▶ The in-force projection illustration.
- ▶ Please illustrate the annual premium needed to carry the contract to maturity on guaranteed interest rate and mortality costs, as well as current interest rate and mortality cost. Also, illustrate no further premiums under the same parameters.

Please send this information to my attention at the this address:

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY, STATE, AND ZIP CODE

In addition, please fax this requested information to my financial adviser, A. Paul Pedersen of Pedersen Associates. Their fax number is 262.241.8069

Your timely response to this request is most appreciated.

Sincerely,

\_\_\_\_\_  
INSURED

\_\_\_\_\_  
INSURED

\_\_\_\_\_  
OWNER (If other than Insured)