



American Equity Investment Life Insurance Company
 P.O. Box 10343, Des Moines, IA 50306-0343
 6000 Westown Parkway, West Des Moines, IA 50266
 www.american-equity.com • Phone: 888-221-1234
 Email: service@american-equity.com

Insurance Agent (Producer) Disclosure for Annuities

Please sign once you have read through and understand the information in this form.

Insurance agent (producer) information (“Me”, “I”, “My”)

First name:	Last name:
Business\agency name:	Website:
Business mailing address:	
Business telephone number:	Email address:
National producer number:	

Customer information (“You”, “Your”)

First name:	Last name:
Entity name:	

What types of products can I sell you? (select all that apply)

I am licensed to sell annuities to you in accordance with state law. If I recommend that you buy an annuity, it means I believe it effectively meets your financial situation, insurance needs and financial objectives. Other financial products, such as life insurance or stocks, bonds and mutual funds, also may meet your needs.

I offer the following products:

Fixed or fixed indexed annuities	Variable annuities	Life insurance
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I need a separate license to provide advice about or to sell noninsurance financial products. I have checked below any noninsurance financial products I am licensed and authorized to provide advice about or to sell.

Mutual funds	Stocks/bonds	Certificates of deposits
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Whose annuities can I sell to you? (select one)

I am authorized to sell:

Annuities from only one insurer	Annuities from two or more insurers	Annuities from two or more insurers although I primarily sell annuities from: _____
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How I'm paid for my work:

It's important for you to understand how I'm paid for my work. Depending on the particular annuity you purchase, I may be paid a commission or a fee. Commissions are generally paid to me by the insurance company while fees are generally paid to me by the consumer. If you have questions about how I'm paid, please ask me.

Depending on the particular annuity you buy, I will or may be paid cash compensation as follows:

Commission, which is usually paid by the insurance company or other sources. If other sources, describe: _____

Fees (such as a fixed amount, an hourly rate or a percentage of your payment), which are usually paid directly by the customer.

If other (describe): _____

If you have questions about the above compensation I will be paid for this transaction, please ask me. I may also receive other indirect compensation resulting from this transaction (sometimes called "non-cash" compensation), such as health or retirement benefits, office rent and support, or other incentives from the insurance company or other sources.

By signing below, you acknowledge you have read and understand the information provided to you in this document.

<input checked="" type="checkbox"/>		
	Customer signature	Date
<input checked="" type="checkbox"/>		
	Joint owner signature	Date
<input checked="" type="checkbox"/>		
	Agent (producer) signature	Date