



Contract/Policy Delivery Receipt

Annuitant/
Insured: DEBORAH MARTINSON
(please print or type)

Contract/
Policy Number: 002902838

Contract/
Policy Owner:
DEBORAH MARTINSON
(please print or type)

Policy Co-Owner:

(if applicable) (please print or type)

I (We), as Contract/Policy Owner(s), acknowledge receipt of this contract/policy delivered to me (us) on:

4/13/21
Date

[Signature]
Contract/Policy Owner Signature

Policy Co-Owner Signature (if applicable)

Farmers Insurance Producer:

ANDREW T SCHMITZ
Insurance Producer Name (please print or type)

13-80-0AH
Agent Code Number

(Insurance Producer, please retain a completed copy of this document with your records.)