



Affiliate:  
Annuity Investors Life Insurance Company®

Fixed & Fixed Indexed Annuities: PO Box 5420, Cincinnati OH 45201 / 800-854-3649 / 800-482-8126 Fax  
Registered Index-Linked Annuities: PO Box 5423, Cincinnati OH 45201 / 800-789-6771 / 800-807-9777 Fax  
Overnight Address: 191 Rosa Parks St, Cincinnati OH 45202

### NOTARIZED SIGNATURE FOR ELECTRONIC APPLICATIONS FORM

If you signed your annuity application electronically, we will need your notarized signature on file to assist us with the administration of your annuity contract, including timely processing of transaction requests. This form must be completed and on file in our office before we can process any transaction request.

#### 1. OWNER/PARTICIPANT INFORMATION (Please print)

Contract/Certificate Number	
Owner/Participant	Social Security Number of Owner/Participant
Joint Owner (if applicable)	Social Security Number of Joint Owner (if applicable)

#### 2. SIGNATURE AND NOTARIZATION

_____ Signature of Owner/Participant (If Corporation, signature and title of authorized officer)	_____ Date	_____ Signature of Joint Owner (If Applicable)	_____ Date
--	---------------	--	---------------

STATE OF \_\_\_\_\_ )  
 COUNTY OF \_\_\_\_\_ ) SS:

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me, the undersigned, a Notary Public in and for said county and state, personally appeared \_\_\_\_\_ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the foregoing Notarized Signature for Electronic Applications Form and acknowledged to me that he/she/they signed the same.

My Commission expires:

\_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
Signature of Notary Public

SEAL