

CHANGE OF INVESTMENT (COI) – MUTUAL FUNDS & VARIABLE ANNUITIES

_____ **Mutual Fund Annuity**
_____ **Client Name** _____ **Joint Client** _____ **Date**

It is not JRL's policy to recommend a "change of investment" (i.e. the sale of one investment and the purchase of another with the proceeds) unless a client's investment or personal objectives can be better served by the change.

1. The objective of the original investment was _____.
2. The objective of the new investment is _____.
3. I did not recommend an exchange to a fund in the original mutual fund family or annuity contract because:

4. As a result of the change, the risk associated with the new investment is (check one):
~ Increased. ~ Decreased. ~ About the same.
5. This request to change investments was (check one):
~ Unsolicited ~ Solicited **(If solicited, the RR must complete PART II)**
6. Client received a prospectus for the new investment on ____/____/20____.

Client Signature _____ **Joint Client Signature** _____ **Date** _____

PART II – If this transaction was solicited, the representative must complete the items below:

Material Facts on which I based my recommendation to liquidate _____
Name of original investment

Material Facts on which I based my recommendation to exchange to _____
Name of new investment

By signing below, the Representative and his/her Supervisor are acknowledging that one of them has provided the customer full disclosure regarding each of the above, a prospectus for the new investment and a copy of this completed form.

Registered Representative Name Registered Representative Signature Date

OSJ/Supervisor Name OSJ/Supervisor Name Signature Date

ANNUITY - TO - ANNUITY COMPARISON

PREVIOUS COMPANY: _____

NEW COMPANY: _____

M&E EXPENSES: _____

M&E EXPENSES: _____

ADMINISTRATION FEES: _____

ADMINISTRATION FEES: _____

RIDER FEES: _____

RIDER FEES: _____

SURRENDER FEE SCHEDULE: _____

SURRENDER FEE SCHEDULE: _____

SURRENDER FEE INCURRED AS A RESULT OF THIS TRANSACTION: _____

FINANCIAL STRENGTH

FINANCIAL STRENGTH

S&P: _____

S&P: _____

AM BEST: _____

AM BEST: _____

HAS THE CLIENT HAD ANOTHER ANNUITY SURRENDERED IN THE PREVIOUS 6 MONTHS?

YES

NO

HAS THE CLIENT'S RISK TOLERANCE CHANGED?

YES

NO

IF YES, PLEASE EXPLAIN: _____

Client Signature

Joint Client Signature

Registered Representative Signature

OSJ/Supervisor Signature