

WESTERN UNITED LIFE ASSURANCE COMPANY

MANHATTAN LIFE INSURANCE COMPANY

Annuity Operations Office

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**TEXT NOTIFICATION
AUTHORIZATION**

1. APPOINTED ANNUITY PRODUCER

Full Individual Name or Licensed Business Entity Name *(must match your current appointment)*

Producer ID

Cell Phone Number

2. AUTHORIZATION TO RECEIVE TEXT MESSAGE NOTIFICATIONS

By signing this form:

- I authorize Manhattan Life Insurance Company (MLIC) and/or Western United Life Assurance (WULA) (the Company) to send text messages to my cell phone only to convey important company information related to interest rate announcements and company notices as necessary
- I understand that I may revoke this permission at any time
- I also understand that standard message and data rates may apply to any messages received from the Company
- I agree that I will not hold the Company liable for any electronic messaging charges or fees generated by this service
- I further agree that I will inform Annuity Marketing Administration if my cell phone number changes in writing



Annuity Producer Signature

Date