

CONTACT INFORMATION: Pacific Life Insurance Company P.O. Box 2378 Omaha, NE 681**23**78 CONTACT INFORMATION (for New York only): Email:AnnuityService@PacificLife.com Pacific Life & Annuity Company P.O. Box 2829 Omaha, NE 681**28**29

	Annuity Contract Number
--	-------------------------

DEFINITION OFFSABILITY

Internal Revenue Code (IRC) Section 72(m)(7) states "an individual shall be considered to be disabled **gene** is nynable substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to reto be of longentinued and indefinite duration."

DEFINITION OF CHRONNICLNESS

To beconsidered schronically aih individual ust be unable perform, without substantial assistance from another individual daily living activities (eating, toileting, transferring, bathing, dressing, and continence) for at least 90 days due to a loss of functor require substantial assistance from another individual to require substantial assistance from another individual to protect against threats to health and safety due to severe cognitive impairment. It is the individual responsibility to notify Pacific theorem for a longer meets the definition of chronically ill according to IRC section 7702B.

CERTIFICATION OF DISABIORYCHRONICAL NESS

Ι,

____ certify th<u>at</u>

Owners' Name

meets the IRC Section 72(m)(7) disability criteria meets the IRC Section 7702B chronically ill criteria.

Physician's Printed Name

Simcfm c

