

WITHDRAWAL REQUE
FOR

WITHDRAWAL REQUIREMENTS
FOR COMPLIANT WITHDRAWALS
FROM GUARANTEED MINIMUM
WITHDRAWAL BENEFIT RICA

Annuity Contract Number _____

6 DISABILITY/CHRONICALLY ILL CERTIFICATION /168

WITHDRAWAL REQUEST
FOR COMPLIANT WITHDRAWALS
FROM GUARANTEED MINIMUM
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Annuity Contract Number _____

9 FOR TSA/403(B) CONTRACTS ONLY. This section must be completed for all TSA/403(b) contracts.

A. Special Tax Information Notice

† By checking this box, I confirm I've read the Special Tax Information Notice within the last 180 days and if applicable, I have the right to wait 30 days prior to requesting this withdrawal. I also confirm that I was able to access the notice online at www.PacificLife.com. The Special Tax Information Notice provides important details about the taxation of your withdrawal and rollover options. If you have any questions regarding your options, Pacific Life recommends you work with a Financial Advisor for assistance.

B. Employer's/Third Party Administrator's Authorization

Amounts attributable to elective salary deferral contributions can be withdrawn only when a distributable event occurs and must be approved by the employer/third-party administrator. Check the applicable event.

- † Attainment of age 59½
- † Disability
- † Return of excess elective salary deferral contributions
- † Hardship (no earnings)
- † Separation from employment
- † Termination of Plan

By signing below, I am acknowledging that:

- (a) I am authorizing this withdrawal/distribution request.
- (b) All information provided in this section is accurate.

Employer's/Third Party Administrator's Signature

mm / dd/ yy

C. Employee Self-Certification

If your contract is exempt from the final 403(b) regulations, your employer does not have to approve this withdrawal/distribution request. If your contract is not exempt, your employer that sponsored this 403(b)/TSA contract MUST approve the transaction.

My contract is exempt from the final 403(b) regulations due to the following reason(s): (Select all that apply)

- † I did not make any salary deferral contributions to this contract after December 31, 2004.
- † My contract was issued with a transfer initiated prior to September 25, 2007 and no additional contributions have been made since that time.
- † My employer that sponsored this contract no longer exists (i.e., out of business).

