

Pacific Life & Annuity Company P.O. Box 2829 Omaha, NE 681**28**29

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ALL OVERNIGHT DELIVERIES: Pacific Life Insurance Company 6750 Mercy Rd, RSD Omaha, NE 68106

Use this form to:

• Change, add, or remove an owner. CompsENERAL INFOI

If cor	ntra cts anentity or custodi adly ne	dplease put the name ofathreuita	nt(s) on the owner line(s).
Owner's irstName	Owner's Middle Name	Owner's Last Name	Annuity Contract Numbe
JointOwner'sFirstName	Joint Owner's Middle Nam	Joint OwnerLast Name	Daytime Telephone Num ()

Trust/Entity Name

CHANGE/ADD/REMOVE OWNBR (\$) 7 2117 4045RB.n BT 0.1.4 (N)t(S)3 139.2 316T 7 . f q 33p1 6T 7 . f q 33p1 Under penalties of perjury, I certify that: (1) the number



ANNUITY CONTRACT/BENEFICIAR CHANGE REQUEST

Annuity Contract Number

2 CHANGE/ADD/REMOVE OWN (CRINS) nued)



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ANNUITY CONTRACT/BENEFICIAR CHANGE REQUEST

Annuity Contract Number

4



