HAVE YOU CHANGED YOUR ADDRESS OR TELEPHONE NUMBER?

NEW ADDRESS:  ☐ Owner  ☐ Insured
Street ________________________________________________________________

City/State _________________________________________ Zip_________________

Phone (    ) ________________________________________________

NOTE: When an address change is completed within a 10 day period of a loan request, the company may either: hold
mailing the payment for 10 business days, reject the request, or require a signature guarantee.

POLICY LOANS TERMS AND CONDITIONS

• After the first policy year, the amount to be borrowed against the policy may not exceed 90% of the cash value, less any
  surrender charge and outstanding loan amount.

• The minimum loan amount is $500.

• When a loan is made, an amount equal to the requested loan amount plus interest in advance until the next policy year will be
  withdrawn from the Subaccounts and transferred to the Loan Reserve, which is part of the Fixed Account. This amount is used as
  collateral for the loan. Amounts transferred to the Loan Reserve do not participate in the investment experience of the
  Subaccounts from which they are withdrawn.

• The loan date is the date we process a loan request. We reserve the right to require payment of a fee to cover loan processing
  and setup expenses. Loan amounts are usually sent to the Owner within seven days of the date we receive a proper loan
  request. The policy will be the only security for the loan.

• At each policy anniversary we will compare the amount of the outstanding loan to the amount in the Loan Reserve. We will
  also make this comparison any time you repay all or part of the loan or request an additional loan. When we make this
  comparison, if the amount of the outstanding loan exceeds the amount in the Loan Reserve, we will withdraw the difference
  from the Subaccounts and transfer it to the Loan Reserve. If the amount in the Loan Reserve exceeds the amount of the
  outstanding loan, we will withdraw the difference from the Loan Reserve and transfer it to the Subaccounts in accordance with
  your current payment allocation. We do, however, reserve the right to require this latter transfer be made to the Fixed Account
  if the loan amount was transferred from the Fixed Account to establish the loan.

• Refer to the prospectus to determine loan interest rates.

• Policy loans affect the policy by reducing the death benefit proceeds and net surrender value by the amount of the outstanding
  loan. Repayment of the loan will increase the death benefit and net surrender value by the amount of the repayment.

• The Owner may repay a loan at anytime while the policy is in force. Any payments made on your policy are recorded as
  premium payments unless a clear indication is made that the payments should be applied as loan repayments.

• Policy loans may have adverse tax consequences and risk your policy’s coverage. We recommend you consult a tax advisor
  prior to making a loan request.

• If the amount of the policy loan plus interest due at any time exceeds the total account value of the policy, we will notify you
  and any assignee of record. If the excess amount is not paid within 61 days after we mail the notice, your policy may lapse.
REQUEST INFORMATION

☐ Partial Loan  Net Amount $ ______________________  Gross Amount $ ______________________

☐ Maximum Available  Note: WRL will hold recent payments for 15 days.

Is the Policy on Monthly Draft? ☐ Yes ☐ No
If yes, would you like your Payments to go towards Loan Repayment? ☐ Yes ☐ No

DISBURSEMENT METHOD INFORMATION

I would like to receive my disbursement sent: (Please select only one option)

☐ By Regular Mail

☐ Overnight (fee applies)

☐ Wire Transfer (fee applies) Trust bank accounts must be titled with the name of the Trust and NOT the Trustee’s name.

________________________________________   ___________________________________________________________
Bank Name     Bank Address

________________________________________   ___________________________________________________________
Bank Phone Number  Bank Routing Number  Bank Account Number
SIGNATURES

Signature of Policy Owner __________________________________________________________ Date ________________

Print Name / Title (POA, Trustee, Guardian, etc.)

Signature of Power of Attorney ______________________________________________________ Date _________________

Signature of Joint Owner or Spouse _____________________________________________________ Date ________________

Signature is required for jointly owned policies

Signature of Assignee ________________________________________________________________ Date ________________

Request must contain the owner’s signature.

NOTE: Medallion Signature Guarantee required for withdrawal of $500,000 or more. A Medallion Signature Guarantee will also be required where proceeds are to be sent to an address other than the address of record. Signatures must be guaranteed by a national or state bank or a member of a national stock exchange or any other institution which is an eligible guarantor institution as defined by the rules and regulations of the Securities and Exchange Commission. A Notarization is not acceptable.

MEDALLION SIGNATURE GUARANTEE

Signature: ____________________________________

Please Note: Unless we have been notified of a community or marital property interest in this contract, we will rely on our good faith belief that no such interest exists and will assume no responsibility for inquiry. The contract owner agrees to indemnify and hold the Insurance Company harmless from the consequences of accepting this transaction.

Faxes may be accepted up to $499,999.