

Fax to: (617) 572-9273 OR

Send To: John Hancock Life Insurance Company  
Guaranteed & Structured Financial Products  
Annuity Division, T-24  
John Hancock Place  
200 Clarendon Street  
Boston, MA 02117



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## Request for Annuity Quote

Attn: \_\_\_\_\_ Office: (617) 572-\_\_\_\_\_

From: \_\_\_\_\_ Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Client Name: \_\_\_\_\_

Qualified  Non-Qualified

State of Residence: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Male  Female

Spouse DOB: \_\_\_\_\_  Male  Female

Annuity Commencement Date: \_\_\_\_\_

Premium Receipt Date: \_\_\_\_\_

Account Balance: \_\_\_\_\_ or Monthly Benefit: \_\_\_\_\_

Options:

Life Annuity - No Death Benefit

Life Annuity  5,  10,  15,  20 Year Period Certain & Continuous

Period Certain:  5,  10,  15,  20 Years

Joint & Survivor:  100%,  75%,  66 2/3%,  50%

Reduced on Participant Death Only

Life Annuity - Full Cash Refund Death Benefit

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_