ANNUITY SUITABILITY QUESTIONNAIRE

First Catholic Slovak Union of the USA & Canada

6611 Rockside Rd, Ste 300, Independence, OH 44131-8013 (Herein called FCSU)

Owner Name(s):		Owner Age(s):	
Product Name:		Premiun	n Amount:
contract is suitable for your investmen	at goals and financial situation. This in cline to provide this information	insurance department to ask information formation will not be used for any other and the second seco	
Financial Status: Annual Income \$0-\$24,999 \$25,000-\$49,999 \$50,000-\$99,999 \$100,000+	Net Worth\$0-\$49,999\$50,000-\$99,999\$100,000-\$249,999\$250,000-\$499,999	\$500,000-\$749,999 \$750,000-\$999,999 \$1,000,000+	Federal Tax Status10%35%15%38.6%27% Other30%
	Tax deferral Gro Other .	owth followed by income	Growth, possible income withdrawals, and partial surrenders):
☐ Regular income	stream 🗆 Lump sum	□ N/A	
☐ Under 1 year <i>Do you now own, or</i> ☐ CDs ☐ Fi <i>What is your source</i>	have you previously owned, the	☐ Between 6 and 9 years ☐ 10 et following financial products? (Cheable Annuities ☐ Stocks/Boneeck all that apply.)	ck all that apply.) ds/Mutual Funds
Date		Owner Signature(s) Print or Type Name(s)	
Date		Agent/Recommender Signatur	e
		Print or Type Name	
		FCSU Agent #:	

IF YOU DON'T HAVE AN AGENT/RECOMMENDER PLEASE SIGN

Consumer Decision to Purchase an Annuity NOT BASED on a recommendation form (ASW-21-2).

CONSUMER REFUSAL TO PROVIDE INFORMATION

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FCSU Financial® is required by your state insurance department to ask information that will help determine whether an annuity contract is suitable for your investment goals and financial situation. The questions pertain to your personal situation at the time of this application and to your understanding of the features of product for which you are applying. This information will not be used for any other purpose and will remain confidential.

You have the legal right to decline to provide your financial information if this is your wish.

DO NOT SIGN UNLESS YOU HAVE READ AND UNDERSTAND THE INFORMATION IN THIS FORM				
You are buying	ı financial product:			
Product Name:	Premium Amount:			
	a product that effectively meets your needs, objectives and situation the agent, broker or FG information about your financial situation, insurance needs and financial objectives.	SU		
	form, it means you have not given the agent, broker or FCSU Financial® some or all the informat e if the Annuity effectively meets your needs, objectives and situation. You may lose some protecti v.			
Statement of P	rchaser:			
	REFUSE to provide this information at this time.			
	I have chosen to provide LIMITED information at this time.			
Date _	Owner Signature(s)			
	Print or Type Name(s)			

CONSUMER DECISION TO PURCHASE AN ANNUITY NOT BASED ON A RECOMMENDATION

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You can buy annuity without the help of an insurance agent, but you'll have to spend a significant amount of time on research. You need to weigh the variety of features available in annuities and how they affect the annuity cost (investment). You should also consider how future annuity payments will be taxed, which affects the after-tax return on the investment. The FCSU Financial® does not provide legal or tax advice. Please consult with your legal or tax professional to determine the best investment product for you. To recommend a product that effectively meets your needs, objectives and situation the agent, broker or FCSU Financial® needs information about your financial situation, insurance needs and financial objectives.

DO NOT SIGN UNLESS Y	U HAVE READ AND UNDERSTAND THE INFORMATION IN THIS FORM
You are buying a financial product	
Product Name:	Premium Amount:
Statement of Purchaser:	
	nnuity but the agent, broker or FCSU Financial $^{\circ}$ did not recommend that I buy it. If I understand I may lose protections under State Law.
Date	Owner Signature(s)
	Print or Tyne Name(s)

INSURANCE AGENT DISCLOSURE FOR ANNUITIES

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DO NOT SIGN UNLESS YOU HAVE READ AND UNDERSTAND THE INFORMATION IN THIS FORM

Agent Information ("M	e", "I", "My")	
Name:		FCSU Agent #:
Business/Agency Nam	e:	
Business/Agency Add	ress:	
Telephone #:	E-Mail:	Website:
National Producer Nu	mber:	
Client Information ("Y	/ou", "Your")	
Name:		
What Types of Products	s Can I Sell you?	
it effectively meets You		te law. If I recommend that You buy an annuity, it means I believe that reds, and financial objectives. Other financial products, such as life et Your needs.
I offer the following p	roducts:	
Fixed or Fixed Ind	exed Annuities	
Variable Annuitie	S	
Life Insurance		
· · · · · · · · · · · · · · · · · · ·	-	ell non-insurance financial products. I have checked below any non- ized to provide advice about or to sell.
Mutual Funds		
Stocks/Bonds		
Certificates of De	posits	

INSURANCE AGENT DISCLOSURE FOR ANNUITIES

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Agent is Independent of Insurer and Able to Recommend Other Annuity Contracts:

Agent is independent of FCSU Fin FCSU Financial®.	ancial [®] . Agent is NOT contractually limited to recommending only annuity contracts of
The total commission to be received purchase payment amount. Commission to be received to the commission	ssion for each purchase payment made to First Catholic Slovak Union (FCSU Financial®). Wed by the agent and/or an affiliate of agent is equal to% a percentage of the missions are not paid by members . Commissions are not subtracted from the purchase act values . All contributions received from clients are credited to your account at 100%.
	est: ists if the agent has a financial interest that a reasonable person could question the advice as a fiduciary. In addition to commissions, the agent has the following other
By signing below, You a	cknowledge that You have read and understand the information provided to You in this document.
Date	Client Signature
	Print or Type Name
Date	Agent Signature
	Print or Type Name