

Foresters Financial

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foresters.com

Purpose of this form	Use this form to create or modify a loan repayment plan on your Certificate.		
Terms used in this form	Foresters Financial TM , Insurer or We mean The Independent Order of Foresters. You or your mean the Owner who is completing and signing this form, unless otherwise specified. Certificate means a Certificate issued by an Insurer. Owner includes Certificate Owner and Absolute Assignee.		
1. Owner Informat	ion		
Information about the Certificate Owner.	If the Insured was a minor at issue and is now the current Owner, we will require a copy of government ID (Driver's License Passport or notarized signature) to accompany this request, unless it has been previously provided. This will ensure that there are no delays in processing.		
	Owner Name (first, middle initial & last)	Date of Bir	th (mm/dd/yyyy)
	Address		Primary Phone Number
2. Create a New Lo	oan Repayment Plan		
If completing this section, you do not need to complete section 3.	O Please set up a scheduled loan repayment of (Minimum equivalent of \$25.00 per month) to be added to my premiums.		
	O For Foresters Universal Life only—Redirect my premium payments toward the loan balance.		
	O For Paid-up Certificates—Please set up a scheduled loan repayment of \$\\$ (Minimum equivalent of \$25.00 per month). A completed Request for Pre-Authorized Checking Plan form must be submitted with this request.		
3. Modify an Existi	ng Loan Repayment Plan		
If completing this section, you do not need to complete section 2.	I wish to modify my existing loan repayment plan by:	(select one of the following)	
	O Modifying my existing loan repayment amount from Please apply this new amount to the loan balance		
	O For Foresters Universal Life only—Redirecting my current premium payments towards the loan balance.		
4. Signature Section	on		
If your request will	Please remember that interest on the outstanding loan is charged as described in your Certificate. Any outstanding loan		
,	balance is deducted from any proceeds payable at time of claim and/or surrender.		
increase the amount	balance is deducted from any proceeds payable at th		
increase the amount drafted through a Pre-Authorized Check	Owner - Print name	Signature of Owner	Date (mm/dd/yyyy)
increase the amount drafted through a Pre-Authorized Check Plan and you are not the	Owner - Print name	X	
increase the amount drafted through a Pre-Authorized Check			Date (mm/dd/yyyy) Date (mm/dd/yyyy)