

**ADDITIONAL CUSTODIAN
FOR MINOR SHEET**

The Variable Annuity Life Insurance Company (VALIC), Houston, Texas
VALIC Retirement Services Company (VRSCO)

THIS FORM MUST BE ATTACHED TO THE BENEFICIARY DESIGNATION FORM TO MAKE THE REQUESTED CHANGE(S)

1. CLIENT INFORMATION

Name: _____ SSN or Tax ID: _____

2. CUSTODIAN FOR MINOR BENEFICIARY

VALIC will pay claims only to a custodian or guardian or through an alternative arrangement to a guardianship for a Minor Beneficiary. If you have named a minor as a primary or a contingent beneficiary, please designate a custodian for the minor beneficiary under your state's Uniform Transfers (Gifts) To Minors Act or contact a local attorney regarding other alternatives to a guardianship.

_____ as Custodian for _____ under the _____ Uniform Transfers (Gifts) to Minors Act.
(name of custodian) (name of minor beneficiary) (state)

3. CLIENT APPROVAL

I certify that the information provided above is true and correct. I request the company to make the requested change(s).

Client's Signature

Date