

The Variable Annuity Life Insurance Company (VALIC)

Address mail to:
Annuity Service Center

Regular Mail
P.O. Box 15648
Amarillo, TX 79105-5648

Overnight Mail
1050 North Western Street
Amarillo, TX 79106-7011

☎ 800-424-4990
Email: aigannuityservice@aig.com
Website: aig.com/annuities
Fax: 806-342-1703

Service Request

Please print or type all information except signatures.

1 Contract Information

Contract (*Certificate*) Number _____

Owner _____ Phone _____

SSN / Tax ID _____

2 Address Change/Phone Number Change

Previous Address _____

City _____ State _____ Zip _____ Phone _____

New Address _____

City _____ State _____ Zip _____ Phone _____

3 Name Change (*Attach Documentation*)

Attach a copy of your driver's license, Social Security card, marriage certificate or court decree.

Annuitant

Owner

Reason: Marriage Divorce Court Decree Correction Other (*explain*) _____

From: _____

To: _____

4 Age Correction

Use this section to correct the age of any Owner or Annuitant covered under this contract. Proof of the correct date of birth must accompany this request.

Name for whom this correction is submitted: _____

Correct DOB: _____

Type of proof submitted: Certified copy of Birth Certificate Copy of Driver's License Passport Other: _____

5 Social Security Number/ Tax Identification Number Correction

Please indicate the name of the person or entity for whom this correction is submitted: _____

Correct Social Security Number or Tax Identification Number: _____

Under penalties of perjury, I certify: (1) that the Social Security Number (SSN) or taxpayer identification number is correct as it appears above; and (2) that I am not subject to backup withholding under § 3406(a)(1)(C) of the Internal Revenue Code; and (3) I am a U.S. person (*including a U.S. resident alien*). The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. You must cross out item (2) if you are subject to backup withholding and cross out item (3) if you are not a U.S. person (*including a U.S. resident alien*).

6 Signatures

Owner *(Please Print)* _____

Owner's Signature X _____ **Date** _____

Joint Owner *(Please Print)* _____

Joint Owner's Signature X _____ **Date** _____

Trustee(s) *(Please Print)* _____

Trustee(s) Signature X _____ **Date** _____