

# Annuity Withdrawal Request Form



4254 Saw Mill Run Blvd., Pittsburgh, PA 15227

Policy Number \_\_\_\_\_ Contract Owner's Name \_\_\_\_\_

## 1 Withdrawal Instructions—Select only ONE withdrawal option.

<b>Option 1</b> <input type="checkbox"/>	One-Time Partial Annuity Withdrawal:
	<input type="checkbox"/> Specific Amount \$ _____ <input type="checkbox"/> Gross (Default) / <input type="checkbox"/> Net
	<input type="checkbox"/> Penalty Free Amount <input type="checkbox"/> Accumulated Interest Only
<b>Option 2</b> <input type="checkbox"/>	Systematic withdrawal of \$ _____ (write amount or accumulated interest)
	<input type="checkbox"/> *Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual Start Date _____ If choosing Monthly, complete the Direct Deposit/EFT information below.
<b>Option 3</b> <input type="checkbox"/>	FULL Surrender of my contract (I have attached the original policy or Lost Policy Form)

## 2 Federal Tax Withholding—GBU will withhold 10% from the taxable portion of your withdrawal, unless you elect otherwise below.

<b>Option 1</b> <input type="checkbox"/>	DO NOT withhold federal income tax.
<b>Option 2</b> <input type="checkbox"/>	Withhold \$ _____ or _____ % for federal income tax.

\* GBU does not withhold any state tax. Please consult your tax advisor with any questions on taxation.

## 3 Delivery Option

<b>Option 1</b> <input type="checkbox"/>	Direct Deposit / EFT – proceeds should arrive in your bank account within 3-5 business days: <input type="checkbox"/> Use current Direct Deposit information provided to GBU. <input type="checkbox"/> Use new/updated bank information (attach a voided check or provide bank information below). <input type="checkbox"/> Checking <input type="checkbox"/> Saving
	Bank Name _____ City/State _____
	ABA Routing # _____ Account # _____
	<b>Option 2</b> <input type="checkbox"/> Check via regular mail.
<b>Option 3</b> <input type="checkbox"/>	Deposit funds to existing GBU Life or Non-Qualified Account # _____

Special Instructions: \_\_\_\_\_

I authorize GBU to process the requested distribution. I understand that any distributions from my contract may be subject to fees, taxes and/or penalties.

<b>Signature</b>	Legal Name <i>(First, Middle Initial, Last)</i>
	Address
	Email _____ Home Phone # _____ Cell Phone # _____
	Signature _____ Date _____
<b>Signature (If joint account)</b>	Legal Name <i>(First, Middle Initial, Last)</i>
	Signature _____ Date _____

Phone: 412-884-5100 | 800-765-4428 | [service@gbu.org](mailto:service@gbu.org) | [gbu.org](http://gbu.org)