

One Forethought Center
Batesville, IN 47006
Phone: 888-606-6372
Interview: 800-737-6972
Fax: 877-432-1646



FAX

To: Forethought Life Insurance Company **Agent:** _____

Fax #: 1-877-432-1646 **Date:** _____

Phone: 1-888-606-6372 **Agent Fax #:** _____

Re: Forethought Freedom Applications **Total Pages:** _____

FAX APPLICATION TRANSMITTAL FORM

Comments: Legibly print the name of the applicant, premium collected, agent's name, agent's writing number, agent's fax and phone number, and the number of pages being faxed including the fax application transmittal form. Fax a maximum of 5 applications at one time including a copy of the premium check. If initial payment is not an Electronic Funds Transfer, mail the check to:

Forethought Life Insurance Company
P.O. Box 148
Batesville, IN 47006

AGENT'S NAME: _____

AGENT'S NUMBER: _____ AGENT'S PHONE NUMBER: _____

APPLICANT'S NAME	PREMIUM COLLECTED	DO NOT USE - PROCESSING CENTER ONLY	DO NOT USE - PROCESSING CENTER ONLY