



**SONS OF  
NORWAY**

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## **ANNUITY SUITABILITY SUPPLEMENTAL AUTHORIZATION FORM**

### **CONSUMER ACKNOWLEDGEMENT**

I acknowledge that after the purchase of this Annuity Product, Sons of Norway will be holding more than 60% of my net worth which could impact unforeseen liquidity needs. I further acknowledge that this is my intention and I authorize Sons of Norway to proceed with this annuity application.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness or FBC Signature