

Address Change Request

MINNESOTA LIFE

Minnesota Life Insurance Company - A Securian Company
Individual Policy Services & Annuity Services • 400 Robert Street North • St. Paul, Minnesota 55101-2098

Name		<input type="checkbox"/> Owner	<input type="checkbox"/> Annuitant
		<input type="checkbox"/> Insured	<input type="checkbox"/> Other
Date of birth	Day time telephone number		

CONTRACT NUMBERS

Life contract number (unless otherwise directed this address change will apply to all life contracts)

Annuity contract number (unless otherwise directed this address change will apply to all annuity contracts)

EXISTING ADDRESS (For verification purposes only)

Street address		
City	State	Zip code

NEW ADDRESS AND TELEPHONE NUMBER

Street address		
City	State	Zip code
Home telephone number		

Is this your residence address

☐ Yes ☐ No If no, please complete the residence address section below (for life contracts only).

Resident street address		
City	State	Zip code

SECONDARY ADDRESSEE (for life contracts only, you may designate another person to be notified when premium is overdue and the policy is in danger of lapsing.)

Name		
Street address		
City	State	Zip code
Home telephone number		

FOR LIFE INSURANCE CONTRACTS ONLY

Is all mail to be sent to this new address? ☐ Yes ☐ No

Are only bills to be sent to this new address? ☐ Yes ☐ No

Special Instructions**SIGNATURES**

Signature (Indicate title if signed on behalf of a corporation or trust)		Date
X Servicing representative signature	Firm/rep code	Date
X		



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