



**Eagle Life Insurance Company®**  
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# Information Update Request

Contract Number \_\_\_\_\_ Contract Owner(s) \_\_\_\_\_

## NAME CHANGE\*

- Annuitant
- Owner

Former Name \_\_\_\_\_ New Name \_\_\_\_\_  
 Date Name Changed \_\_\_\_\_ Reason \_\_\_\_\_

*NOTE: The space provided is for name corrections and updates only. This form does not change ownership or beneficiary designations.*

*\*Proper documentation (copy of marriage certificate, drivers license, divorce decree, etc) must accompany request for name change.*

## ADDRESS CHANGE

- Annuitant
- Owner

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 \_\_\_\_\_ E-mail address \_\_\_\_\_ Phone Number \_\_\_\_\_

## PASSWORD ADDITION

\_\_\_\_\_  
 PASSWORD\*\* (alpha and numeric characters only - NO symbols allowed)

*\*\*This does not change your password on the Interactive Client website. Once this password has been established, client access to information will not be allowed without password being provided. Password will remain on account unless we receive written instruction from client requesting removal.*

## PLEASE SIGN & DATE BELOW

X \_\_\_\_\_  
 Signature of Owner\*\*\* Phone Number \_\_\_\_\_ Date \_\_\_\_\_

X \_\_\_\_\_  
 Signature of Joint Owner (if applicable) Phone Number \_\_\_\_\_ Date \_\_\_\_\_

*\*\*\*For corporations, an officer other than annuitant must sign and must include their title after their signature. If you are signing on behalf of the owner as a fiduciary, you must indicate the capacity in which you are signing (e.g. trustee, POA, conservator, etc.).*