



(Exhibit A)
Current Insurance Status

TO: New York Life Insurance Company
One Rockwood Road
Sleepy Hollow, NY 10591

Name of Applicant: _____
Group Policyholder: **AVMA LIFE Trust**

For Coverage under Group Policy: **G – 14884/5/6**

Date of Application: _____

Please check the appropriate box, sign and date.

I currently have a life insurance and/or annuity contract.

I do not currently have a life insurance and/or annuity contract.

Signature of Applicant: _____ Date: _____

Signature of Agent: _____ Date: _____

GPA-CIS-Rep

700ed/700

(EXHIBIT C)
Agent Certification

I have used only New York Life Insurance Company approved sales materials in connection with the subject application. Copies of all sales materials used were left with the applicant.

Signature of Agent: _____ Date: _____

GPA-AC-Rep

700ed/700