



**Genworth**<sup>®</sup>  
Financial

Genworth Life & Annuity  
Genworth Life  
Genworth Life of New York  
P. O. Box 320  
Lynchburg, VA 24506  
Tel: 888 325.5433

# Illustration waiver acknowledgment

from Genworth Life and Annuity Insurance Company,  
Genworth Life Insurance Company  
and Genworth Life Insurance Company of New York<sup>†</sup>

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- Please leave one copy of the signed acknowledgment with the applicant and submit one signed copy with the application.
- This form is not considered complete without all required fields and signatures completed.
- This form is not acceptable for use with solicitations involving military personnel. A full illustration must be submitted with the application.

**Michigan does not allow an illustration waiver. A complete illustration is required.**

## Insured information

Insured name *First, M.I., Last*

•

Date of birth

•

## Acknowledgment of no illustration

Please complete when illustration matching the coverage applied for is not provided.

You did not receive an illustration that matches the coverage for which you applied. You understand that you will receive an illustration matching the policy as issued when the policy is delivered.

Owner signature

Date

The owner is referred to as “you” in this acknowledgment.

**X**

•

The agent/broker is referred to as “I” in this acknowledgment.

I certify that I did not provide an illustration matching the coverage for which you applied.

Agent/broker signature

Date

**X**

•



<sup>†</sup>Only Genworth Life Insurance Company of New York is licensed in New York.