



INFORMATION RELEASE AUTHORIZATION

January 13, 2014
MARY J. DANIELL
NORMAN, TX 77871

You have recently received a benefit payment from Family Heritage Life Insurance Company of America. We are pleased that you saw the importance of our insurance program and decided to provide your family with supplemental financial protection.

The best way to get our message to others is on the recommendation of those who have benefited from our insurance programs. We ask your permission to tell others that a benefit was paid to you and share the information below.

Whether you decide to grant us permission or not will have no effect on the payment or eligibility for benefits of your policy/certificate, its terms or conditions. Thank you for your consideration in helping us help others.

Total Paid: \$57,168.00
Agent Name: Robert Daniel

Coverage Type: Intensive Care
County: Leon

I hereby give Family Heritage and its insurance representatives my permission to use the facts shown above, together with any writings and comments made by me below, in connection with your sales presentations to prospective customers and in educational and advertising programs.

Signature: Raymond J. Daniel Date: 3-14-14

Comments: I was upset with my wife when she took out this policy. At the time, I was an over the road truck driver and was out of town at the time and was not home when she did this. Boy am I glad she did.

In 2012, I was diagnosed with congenital heart disease and was told that I only had 6 months to a year to live.

(If necessary, please continue on the other side.)

Over →

This Authorization may be revoked by written request to Family Heritage, except to the extent that Family Heritage has taken action in reliance on the authorization. The information that is used or disclosed pursuant to this Authorization may be reclassified by its recipient and may not retain any legal protections. This Authorization may be used for marketing insurance to prospective customers and if those customers purchase insurance, Family Heritage will receive remuneration in the form of premium payments.

This Information Release Authorization may be used through January 13, 2016

Approved

(440) 922-5151

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