

**AMERICAN NATIONAL INSURANCE COMPANY**  
**Virtual Sales Assistant - SUBSCRIPTION FORM**

Please place my order for a **one-year subscription** for the Virtual Sales Assistant, offered through Financial Services Online, for \$72.00.

Payment Options:                        Check enclosed (payable to ANICO)  
               Credit Card (VISA/MasterCard ONLY)

I prefer to pay via **monthly payroll deduction** of \$10.00 (Total annual cost: \$120).  
**(APPLIES TO ANICO AGENTS ONLY)**

           Monthly Deduction Payment of \$10.00  
   from ANPAC Commissions.\*

**\*I hereby authorize American National Insurance Company to withdraw from my ANPAC commissions each month \$10.00. If the ANPAC commissions are insufficient to pay the amount due, then I hereby authorize American National Insurance Company to withdraw from my life commissions. Withdrawal will begin with commissions paid in the following month and will continue for twelve months or until the 12 month amount is paid, whichever comes first.**

**PLEASE PRINT:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ PC#: \_\_\_\_\_ BO #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Type of credit card:             VISA     MASTERCARD

Name As It Appears On Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**RETURN THIS ORDER FORM TO:**

\_\_\_\_\_ **New subscriber**

\_\_\_\_\_ **Renewal**

**FOR ANICO AGENTS:**  
**ANNETTA ALPHONSO – FAX #(409) 766-2951**  
**EMAIL: annetta.alphonso@anico.com**  
**MULTIPLE LINE MARKETING**  
**ONE MOODY PLAZA – 15<sup>th</sup> Floor**  
**GALVESTON, TEXAS 77550-7999**

**FOR FARM FAMILY AGENTS:**  
**MIKE CHASZCZEWSKI**  
**FARM FAMILY LIFE INSURANCE CO.**  
**P. O. BOX 656**  
**ALBANY, NY 12201-0656**

For Home Office Use Only:

Order Received: \_\_\_\_\_

Processed Payment: \_\_\_\_\_

Date of next renewal: \_\_\_\_\_ Updated Sprdsht: \_\_\_\_\_