



Phone withdrawal authorization agreement

Before you begin

Authorize phone withdrawals over the phone.

You can call us at 800-344-1029 to enroll in phone withdrawal authorization.

You can also complete this form entirely online.

- Visit the forms page at johnhancock.com/annuities.
- Find the Phone withdrawal authorization agreement form.
- Click the link to submit online and follow the step-by-step instructions.

Important information

Use this form to authorize withdrawals to be made over the phone by the contract owners or the financial professional of record and their administrative staff on behalf of the financial professional. Once a phone withdrawal authorization is on file, contract owners, financial professionals, and their administrative staff on behalf of the financial professional can:

- Take partial withdrawals of \$250,000 gross or less.
- Take full withdrawals of \$250,000 gross or less and terminate the contract.
- Initiate automated withdrawal programs, including Income Made Easy, required minimum distributions, and systematic withdrawals (contract permitting).


Phone withdrawals are not permitted for the following contracts:


- Contracts where a legal guardian, conservator, or other fiduciary has been appointed for the owner or the owner's estate.
- Contracts held under a state's Uniform Transfers or Uniform Gifts to Minors Act.
- 403(b) contracts or contracts held in a tax-qualified retirement plan, 457 plan, or deferred compensation plan.
- Custodial account contracts.
- Trust-owned contracts.
- Contracts where the owners are not individuals.
- Contracts subject to an irrevocable beneficiary designation.


Power of attorney requirements:

If this form is signed by an attorney-in-fact, a copy of the power of attorney must be attached to this form. John Hancock reserves the right to request proof, satisfactory to us in our sole discretion, that the power of attorney has not been revoked and that the principal is alive before taking action based on this form.

Contact information

 **Website:**
johnhancock.com/annuities

 **Phone:** 800-344-1029
TTY: 800-555-1158

 **Mail:**
See return instructions at end of this form.



1. Contract information

Contract number

Owner information:

Owner name (First) MI Last Date of birth (mm/dd/yyyy)

Social Security number (or TIN) Phone number Email address

Address (Street)

City State Zip code Country (if outside the U.S.)

☐ Check here if address provided is permanent address change for your annuity contracts.

Financial professional name (if applicable) (First) MI Last Phone number

Co-owner information (if applicable):

Co-owner name (First) MI Last Date of birth (mm/dd/yyyy)

Social Security number (or TIN) Phone number Email address

Address (Street)

City State Zip code Country (if outside the U.S.)

2. Agreement

Taking withdrawals from some of our contracts may adversely affect the underlying guarantees. If you have questions or need additional information, please consult your contract and/or prospectus, call us at 800-344-1029 to speak with a customer service representative, or contact your financial professional. Contract owners who authorize John Hancock to accept withdrawal instructions by phone agree that such withdrawals are made subject to the following provisions:

- For your protection, phone conversations are recorded at the time of the call.
- For variable annuities, withdrawals made based on instructions received in good order by John Hancock before 4:00 P.M. Eastern time will be processed using the unit values for that day. Withdrawal instructions received after 4:00 P.M. Eastern time will be processed using the unit values for the next valuation period. Only one set of withdrawal instructions will be accepted per valuation period.
- Instructions for full or partial withdrawals of \$250,000 gross or less per contract are permitted per transaction.
- Instructions may be given by calling 800-344-1029 on regular business days.
- In the event that proper identification is not provided, John Hancock reserves the right to refuse to act on phone withdrawal instructions.
- All withdrawals made pursuant to instructions received by phone must be made in accordance with the terms of the contract and/or prospectus. If withdrawal instructions are not in good order, the withdrawal will not be made and the contract owner will be notified within 48 hours.
- No phone withdrawals will be allowed on contracts whose address or owners of record changed in the last 15 days.
- The check may be payable only to the owners of record and may be mailed only to the address of record.
- The owners of record or the financial professional of record and their administrative staff on behalf of the financial professional can request a withdrawal as long as such person provides the information requested. The financial professional and their administrative staff on behalf of the financial professional have authority to submit the owner's applicable federal and state withholding elections when requesting a withdrawal.
- **John Hancock will wire money only under the following conditions:** You have previously provided us with accurate wire information (preferably a copy of a voided check), or the money is wired to a financial institution account in the name of the owners of record.
- This authorization will remain in effect until there is a change of ownership or you direct us to remove such authorization either verbally or in writing.



3. Delivery options

Select ONE of the following options. Unless otherwise instructed below, the payments will be mailed to the owner's address of record.

Option 1: ☐ **Electronic funds transfer (EFT)**—The financial institution (bank, savings and loan, or credit union) you elect to receive electronic deposits must be a member of the automated clearing house (ACH) network. Please contact your financial institution if you are unsure that it is a part of the ACH network. The financial institution account must be registered in the name of the John Hancock contract owners. Payments will arrive in your financial institution account within 3–5 business days. However, if your contract is not eligible for EFT, we do not have validated EFT instructions on file, or your financial institution account information cannot be authenticated, your distribution check will be sent to your address of record by regular mail.

Provide your account information below. Attach a voided check here. Deposit slips and starter checks are not accepted. The voided check must be in the name of the owner. If a fiduciary (e.g., power of attorney, guardian, conservator, etc.) is the owner, their fiduciary status must be preprinted on the check (not applicable if the fiduciary is a joint owner). Example: Jane Smith, POA.

☐ Checking

☐ Savings

Owner name	
Address _____	
City, State, Zip code _____	Date _____
Pay to the order of _____ \$ _____	
Financial institution name	
Address _____	
City, State, Zip code _____	
For	
⑆ 1 2 3 4 5 6 7 8 9 ⑆ 0 1 2 3 4 5 6 7 8 9 0 1 2 3 ⑆ 0 1 2 3	
Routing number	Account number
Check number	

Financial institution

Routing/ABA number

Names listed on account

Account number

Important: If you are unable to provide a voided check, please include either a copy of a recent account statement or a letter from your financial institution (on their letterhead) that indicates the following information: the routing/ABA number, the account number, the account type (checking or savings), and the owners of the financial institution account. If you provide a letter, the letter must be signed by an authorized party at the financial institution along with all contract owners to certify that the information provided is correct.

Option 2: ☐ **Check (default)**—The payments will be in the form of a check and mailed to your address of record within 5–7 business days.

Option 3: ☐ **Check to an alternate address**—The payments will be in the form of a check and mailed to the address below within 5–7 business days.

Note: A Medallion Signature Guarantee (MSG) is required if you choose to have the payments sent to an alternate address. The MSG must be original; facsimiles will not be accepted.

Alternate address (Street)

City

State

Zip code

Country (if outside the U.S.)

4. Signatures and authorizations**EFT authorization:**

I hereby authorize John Hancock Life Insurance Company (U.S.A.)/John Hancock Life Insurance Company of New York (John Hancock) to deposit annuity payments directly to my bank, savings and loan, or credit union (financial institution) account, as indicated on this form. I authorize the financial institution identified on this form to accept such credit entries from John Hancock, and to credit my account at that financial institution in accordance with those credit entries. If an amount should be credited to my account in error (including any overpayment to my account), or after my death or ineligibility, I authorize and direct the financial institution designated on this form to debit my account and refund such amount to John Hancock. I agree to direct my joint account owners, executor, administrators, or assignees to refund to John Hancock any payments that are made following my death so that they may be redistributed to my beneficiaries or contingent annuitants, if applicable. I agree to hold John Hancock harmless for any failure by my financial institution to credit my account or for any delay by my financial institution in crediting funds to my account.

I agree that this arrangement is made for my convenience, and that any payments directly received by me, rather than credited to my account, as a result of mistake or otherwise, shall not subject John Hancock to any liability in excess of that owed to me under the applicable annuity contract. I understand that John Hancock is relying on the information that I have provided on this form, and further understand that John Hancock will not be liable for any losses or charges due to incorrect, outdated, or incomplete information that has been provided on this form.

If the financial institution account identified on this form is jointly owned, this authorization will not be effective without the signature of the joint account owner below.

Joint account owner EFT authorization:

I agree to notify John Hancock upon the death of the contract owner and I agree to refund John Hancock any payments that are made to the financial institution account identified on this form following the contract owner's death or ineligibility. I understand that I may be personally liable, both individually and as a joint owner of the account identified on this form, for the amount of all benefit or survivor benefit payments with due dates after the death of the contract owner. If I am entitled to any benefit from the applicable annuity contract as a beneficiary or contingent annuitant of the contract owner, the amount of my liabilities may be deducted from the amount payable to me.



4. Signatures and authorizations (continued)

By signing this form, I am providing written permission for John Hancock to obtain a consumer report about me as part of its process to authenticate my identity and to protect against fraud. This consumer report will be used solely to validate that I am an authorized holder, user, or signatory of the account used or to be used in connection with the current or future transfer of funds. John Hancock will notify me if any adverse action is taken on the basis of such report.

☐ I have read and understand the entirety of this form, including the important information included on page 1.

Certification required of U.S. persons only (including U.S. citizens, U.S. resident aliens, or other U.S. persons).

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number,
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person, including a U.S. resident alien (as defined in the IRS Form W-9 instructions).

Certification instructions: You must check the box below if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

☐ I am subject to backup withholding as a result of a failure to report all interest and dividends.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to prevent backup withholding.

SIGN
HERE

Signature of owner (or fiduciary)

Date signed (mm/dd/yyyy)

SIGN
HERE

Signature of co-owner (or fiduciary) (if applicable)

Date signed (mm/dd/yyyy)

Place Medallion Signature Guarantee stamp in below box (if applicable). Must be original and cannot be faxed.

Medallion Signature Guarantee

Medallion Signature Guarantee



FOR JOHN HANCOCK VERIFICATION USE ONLY.

EFT authorization for joint financial institution account owner:

SIGN
HERE

Signature of joint financial institution account owner (if any)

Date signed (mm/dd/yyyy)



Return instructions

Please submit your completed and signed form via one of the following:



National contracts:

John Hancock Annuities Service Center
PO Box 55444
Boston, MA 02205-5444

New York contracts:

John Hancock Annuities Service Center
PO Box 55445
Boston, MA 02205-5445

All overnight mail:

Annuities Service Center
John Hancock Insurance
410 University Avenue, Suite 55444
Westwood, MA 02090



Register online:

Go to johnhancock.com/annuities to create an online account and gain access to contract-specific details and self-service tools. Once registered, select to receive your contract documents electronically under your Paperless settings.

