(Term & Whole Life) Notice Concerning Advance Policy Dating Procedures

(Please review the Date of Issue on page 3 of your policy and read this Notice for important information on policy dating procedures)

The Date of Issue, as shown on page 3 of your policy, is the date when the policy is in force and deduction of charges begins.

If, at the time your policy was delivered, premium was owed or there was an outstanding policy requirement, (e.g., a policy amendment that required your signature), your policy may have been advance dated in order to give your representative time to deliver your policy and collect the premium or other policy requirements. If you still have outstanding premium or policy requirements, your policy is not in force. Please read the Advance Dating explanation below.

Advance Dating

Advance dating is intended to eliminate those instances in which charges are deducted before your policy is in force. Your policy was advance dated so the date of delivery would match more closely with the Date of Issue (on page 3 of your policy). If your policy was delivered prior to the Date of Issue and you have satisfied all outstanding premium and/or policy requirements, your policy is in force.

Initial Premium Payments Made By Electronic Check

If you are paying your initial premium by electronic check and did not request a specific draft day on the Preauthorized Checking Authorization, the draft day will be the same day of the month as the Date of Issue shown on page 3 of your insurance policy.

Or

If your policy has a Date of Issue that is in the future, you can elect to start your important insurance coverage today. By signing below, you are authorizing American General Life Insurance Company to make your draft date coincide with the date this authorization is signed. This means the initial draft will take place when this notice is returned with all other fully executed policy delivery requirements AND all future premiums will be electronically drafted on the day of the month this authorization is signed.

Please debit my account for all outstanding premiums due upon receipt of this notice and all other outstanding policy delivery requirements.

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/ 1	Signature(s) of Account Holder(s) as it appears on Bank Records		Date
	Name of Insured:	Policy Number:	