

**RELIANCE STANDARD LIFE INSURANCE COMPANY
TRUST CERTIFICATION**

Contract Number (if new application, enter
"Applied For"):

Name of Trust/Policy Owner:

Tax Identification Number of Trust:

Trustee(s):

Name of Trustee of the Trust:

Name of Trustee of the Trust:

Name of Trustee of the Trust:

Name of Trustee of the Trust:

Address of Trust/Policy Owner:

Type of Trust (check box for trust type):

☐ Revocable

☐ Irrevocable

Name of Trust Grantor:

Trust Effective Date:

Please indicate the signing authority of
trustees (select one):

☐ All trustees must sign when acting on behalf of trust

☐ Trustees may act independently on behalf of trust

☐ A majority of trustees must sign when acting on behalf of trust

☐ Not Applicable (trust has only one trustee)

☐ Other (specify):

The undersigned trustee(s), individually or collectively, if there are co-trustees ("Trustee") represents and warrants to Reliance Standard Life Insurance Company (the "Company") that the information provided in this Trust Certification is accurate and complete and certifies, acknowledges and agrees that:

1. The above-referenced Trust (the "Trust") is in full force and effect;
2. The undersigned has been duly appointed to act as the trustee in accordance with the terms of the Trust.

- SIGNATURE(S)**

The undersigned agree(s) to promptly inform the Company, in writing, of any amendment to the Trust, any change in the composition of the trustee of the Trust, or any other event that could affect the representations made in this Trust Certification. The undersigned understands that the Company will rely on this Trust Certification in accepting my instructions.

City & State

Date _____

X

Signature of Trustee

Printed Name

Date _____

X

Signature of Trustee

Printed Name

Date _____

X

Signature of Trustee

Printed Name

Date

X

Signature of Trustee

Printed Name _____

Date _____