JACKSONSM

Claims Administration

March 21, 2012

STEVEN H SHORR APT 3 1027 W 11TH ST SAN PEDRO, CA 90731-3558

Deceased:

(Redacted)

This letter was sent to the party listed below:

(Redacted)



Dear Tam

Thank you for your patience during our processing of this claim.

Please refer to the attached statement for a breakdown of benefits received.

The Internal Revenue Service (IRS) requires us to report payments made, so we will be sending both you and the IRS tax form 1099R (for Annuity benefit payments) and form 1099INT (for the interest amounts over \$600.00), in January of next year.

It is important that you sign the check(s) exactly as made payable.

If you have any questions or need additional information, please contact our Service Center toll free at 888/565-4995.

Commentary provide the second

Sincerely,

Ton' 2 from

Toni Zvonar AVP, Claims Administration

CC: STEVEN H SHORR

Enclosure: Check; Statement of Benefits

Jackson National Life Insurance Company 1 Corporate Way, Lansing, MI 48951 800/644-4565





Claims Administration

Proceeds Payable to:

Policy Number: Claim Number:	Redacted
Policy Information:	
Policy Benefit:	\$300,000.00
Loan Payoff:	\$0.00
Premium Due:	\$0.00
Beneficiary Information:	
Benefit Paid:	\$300,000.00
Interest Paid:	\$1,939.73
Misc Interest Paid:	\$0.00
Premium Refund:	<mark>\$471.33</mark>
Foreign Withholding:	\$0.00
Federal Withholding:	\$0.00
State Withholding:	\$0.00
Distribution Amount: \$302,411.06 Interest Paid was calculated from 01/24/12 to 03/22/12 @ 4.00%	

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