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Making Changes to Your Information

Link to Pension Website:

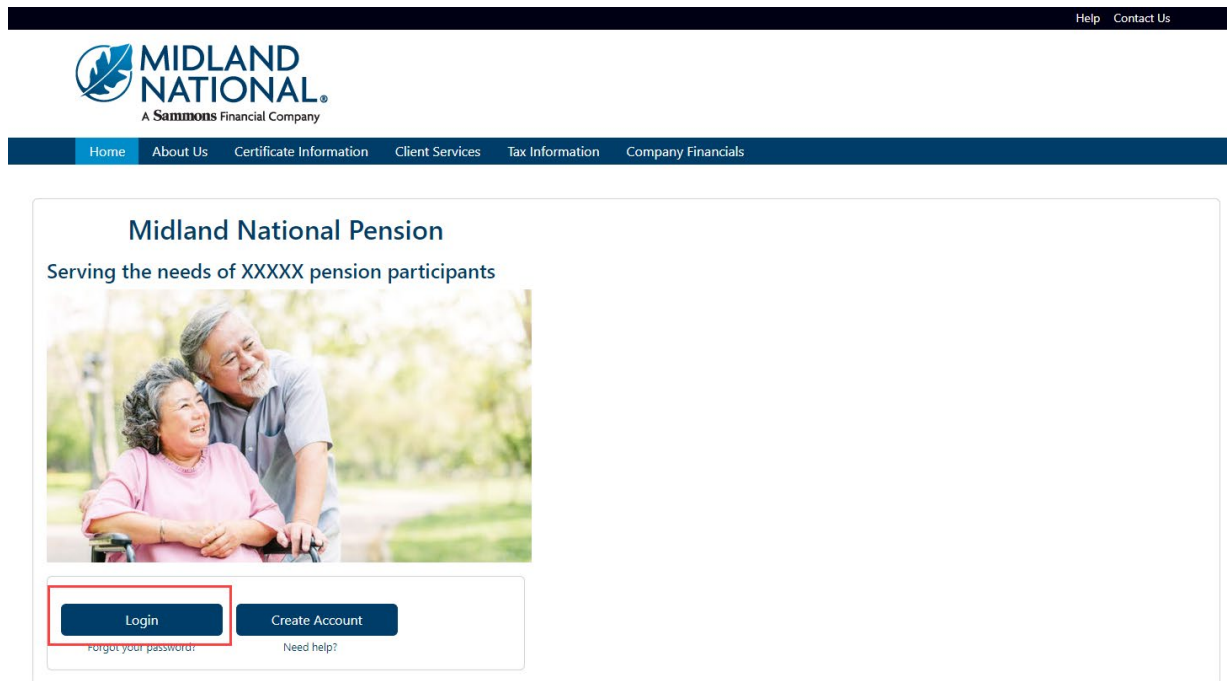
<https://www.midlandnationalpension.com>

Information about making changes:

- You can make multiple types of changes (e.g. address change, email, and phone number change) during a single session
- Upon submission of your changes, you will receive an email notification confirming your changes in addition to the confirmation displayed on the screen. Examples are available in [Appendix A](#) of this document.
- Please allow 2 business days for processing of changes as we may require some additional information or documentation from you (we will contact you if this is necessary)
- If you have multiple certificates with us, you will need to submit a change for each certificate
- You cannot make another change of the same type (e.g. address change) on the same certificate until we have completed processing of the change you have already submitted. A message will appear on the screen indicating you have a pending request. Examples are available in [Appendix B](#) of this document.

Logging In:

1. Click on the 'Login' button located at the bottom of the screen



2. Type in your username and password



Sign In

Remember me

Sign In

3. Click on the 'Sign In' button



Sign In

Remember me

Sign In

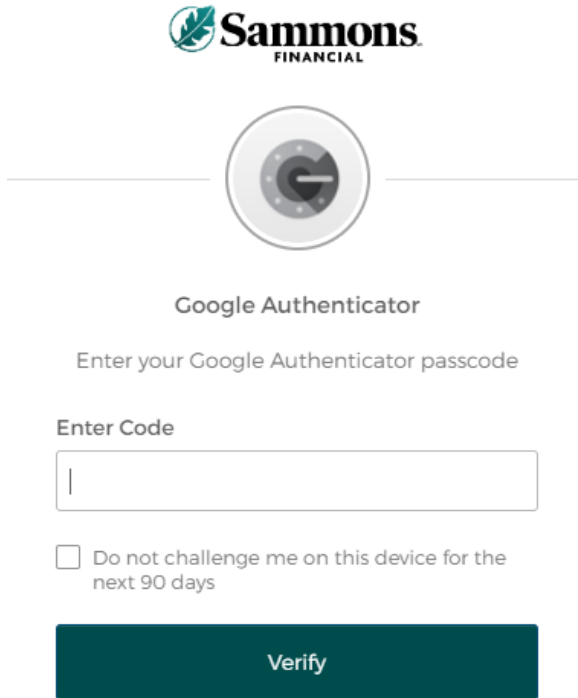
4. You may be asked to authenticate in the following situations:

- a. If you are logging in for the first time
- b. If you haven't logged into your account for at least 90 days
- c. If you are logging into your account with a different device

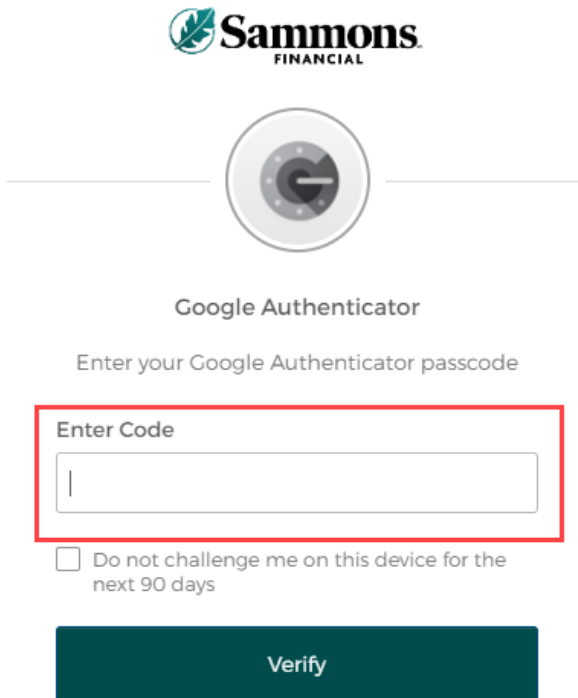
NOTE: Screens below will show an example for each authentication type

Google Authenticator:

- a. The following screen appears





- b. Go into your Google Authenticator app located on the device you used to register your account
- c. Type in the authentication code displayed in Google Authenticator within the 'Enter Code' field



- d. To ensure that you don't receive this message every time you access your account, click on the checkbox under the 'Enter Code' field that displays the following verbiage:

'Do not challenge me on this device for the next 90 days'



Google Authenticator

Enter your Google Authenticator passcode

Enter Code

 Do not challenge me on this device for the next 90 days

- e. Click on the 'Verify' button

Google Authenticator

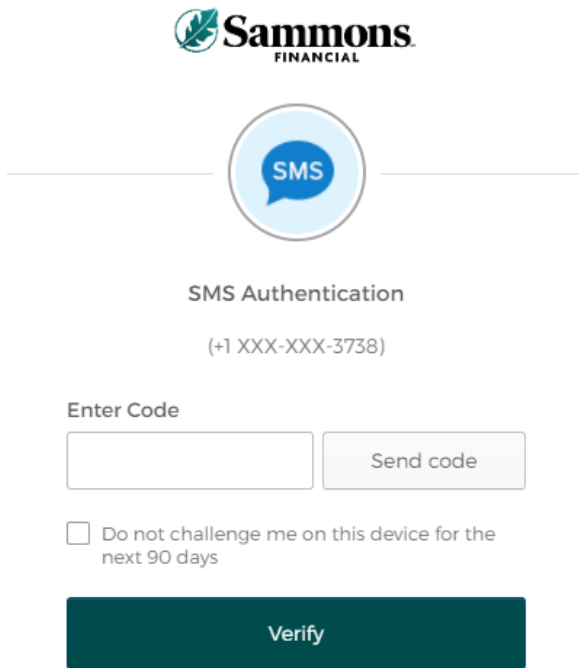
Enter your Google Authenticator passcode

Enter Code

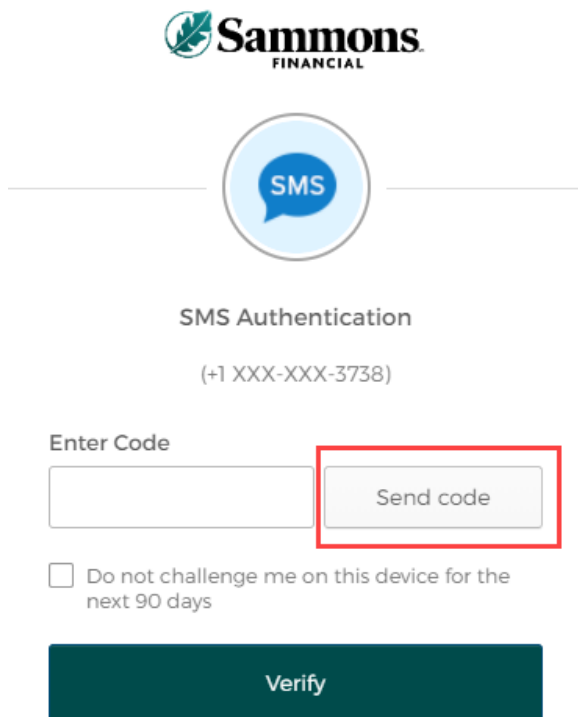
 Do not challenge me on this device for the next 90 days

SMS Authentication:



- a. The following screen appears



- b. Click on the 'Send code' button



- c. Type in the authentication code you received via the authentication method you selected when you registered your account within the 'Enter Code' field

SMS Authentication



(+1 XXX-XXX-3738)

Enter Code

Do not challenge me on this device for the next 90 days

- d. To ensure that you don't receive this message every time you access your account, click on the checkbox under the 'Enter Code' field that displays the following verbiage:

'Do not challenge me on this device for the next 90 days'


SMS Authentication


(+1 XXX-XXX-3738)

Enter Code

Do not challenge me on this device for the next 90 days

- e. Click on the 'Verify' button






SMS Authentication
(+1 XXX-XXX-3738)


Enter Code

Do not challenge me on this device for the next 90 days

Voice Call Authentication:

- a. The following screen appears







Voice Call Authentication
(+1 XXX-XXX-3738)

Enter Code

Do not challenge me on this device for the next 90 days

- b. Click on the 'Call' button



Voice Call Authentication

(+1 XXX-XXX-3738)

Enter Code

 Do not challenge me on this device for the next 90 days

- c. You will receive a call from a phone number based upon the authentication method you selected when you registered your account. Type in the code provided in the phone call within the 'Enter Code' field

Voice Call Authentication



(+1 XXX-XXX-3738)

Enter Code

 Do not challenge me on this device for the next 90 days

- d. To ensure that you don't receive this message every time you access your account, click on the checkbox under the 'Enter Code' field that displays the following verbiage:

'Do not challenge me on this device for the next 90 days'






Voice Call Authentication
(+1 XXX-XXX-3738)

Enter Code

 Do not challenge me on this device for the next 90 days

- e. Click on the 'Verify' button

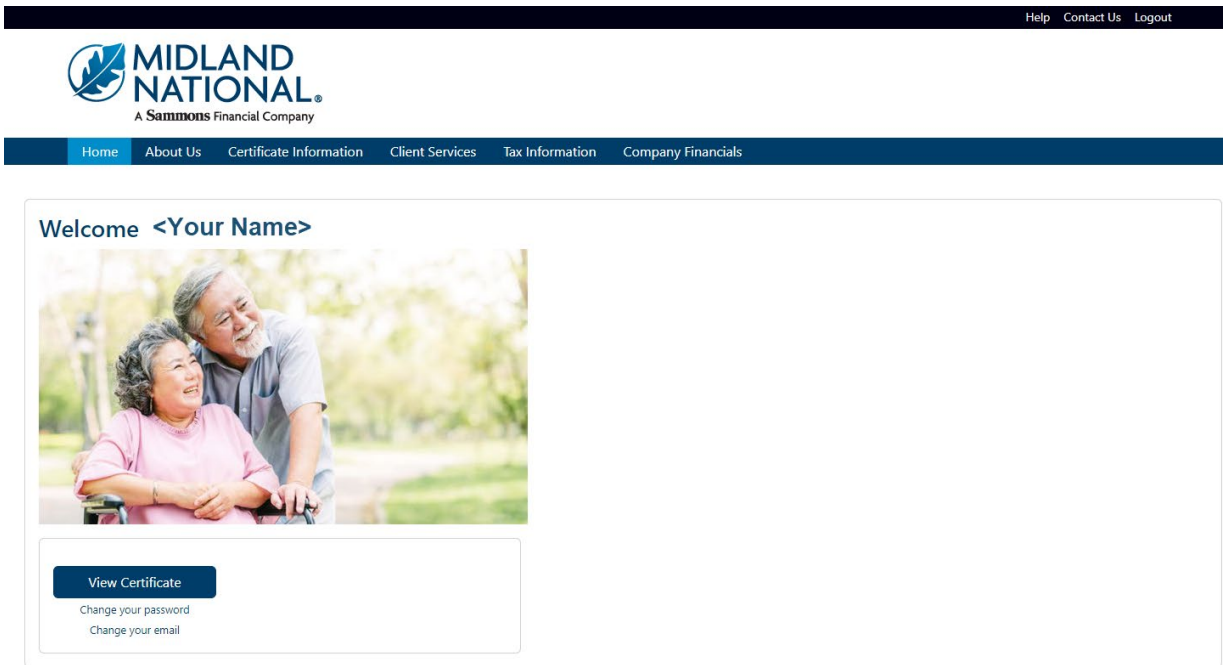



Voice Call Authentication
(+1 XXX-XXX-3738)

Enter Code

 Do not challenge me on this device for the next 90 days

5. The following screen will be displayed:

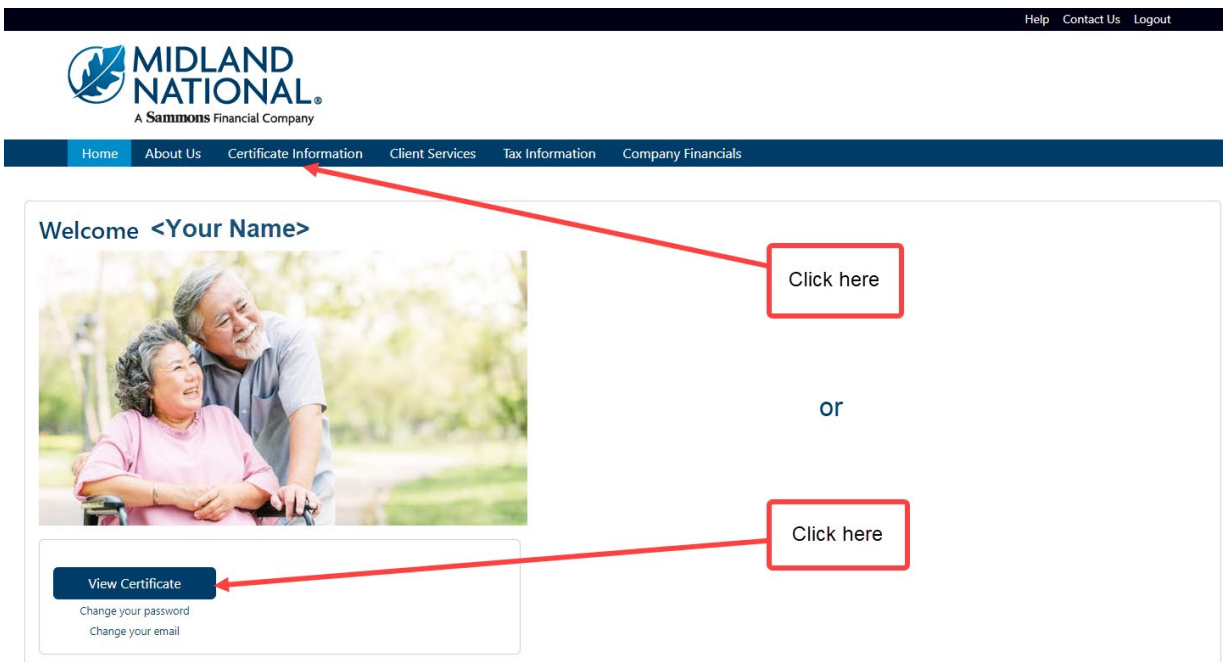


There are two ways to make changes to your information:

- Certificate Information Screen (Address, Phone, Bank Information, and Beneficiary changes only)
- Client Services Screen

Certificate Information

1. Click on the 'View Certificate' button on the Home page or click on the Certificate Information link on the top navigation bar



2. The following screen will be displayed

Help Contact Us Logout

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A Sammons Financial Company

Home About Us **Certificate Information** Client Services Tax Information Company Financials

Print

Participant Information Change Address

Participant Name: Herman Munster	Phone Number:	
Address: 1313 Mockingbird Lane		
City: Mockingbird Heights	State: WA	Zip Code: 11111
Email: hmunster@gmail.com	Date of Birth: 01/01/1793	

Certificate Information

Certificate Number: 111111	Certificate Type: Single Life	Status: ACTIVE
Normal Retirement Date:	Early Retirement Date:	Disbursement Status: Deferred
(Projected) Payment Amount*: \$500.00	% Non-Taxable:	
Required Commencement Date:	COLA Amount: \$0.00	COLA Percentage: 0.00%

*Amount is based upon the Normal Retirement Date.

Earnings Information

Certificate Number: 111111	Frequency: Monthly	Disbursement Start Date: 10/01/2033
Last Disbursement Date:	Next Disbursement Date:	LTD Gross Disbursement: \$0.00

Print

Change Address:

1. Click on the 'Change Address' button in the upper right corner of the Participant Information section

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Print

Participant Information Change Address

Participant Name: Herman Munster	Phone Number:	
Address: 1313 Mockingbird Lane		
City: Mockingbird Heights	State: WA	Zip Code: 11111
Email: hmunster@gmail.com	Date of Birth: 01/01/1793	

Certificate Information

Certificate Number: 111111	Certificate Type: Single Life	Status: ACTIVE
Normal Retirement Date:	Early Retirement Date:	Disbursement Status: Deferred
(Projected) Payment Amount*: \$500.00	% Non-Taxable:	
Required Commencement Date:	COLA Amount: \$0.00	COLA Percentage: 0.00%

*Amount is based upon the Normal Retirement Date.

Earnings Information

Certificate Number: 111111	Frequency: Monthly	Disbursement Start Date: 10/01/2033
Last Disbursement Date:	Next Disbursement Date:	LTD Gross Disbursement: \$0.00

Print

2. The following screen appears

Change Address

- Provide your updated address information within the fields below and click on the 'Change Address' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Address Line 1
 - City
 - State
 - Zip
- For foreign address changes, click on the checkbox labeled 'Foreign Address' below and submit your change(s) in the appropriate address lines. Street addresses should be on Line 1 and remaining information on Line 2.
- If you are changing your residence state and have elected to withhold state taxes, please be aware that this update will not automatically change your withholding state. You will need to complete a [Withholding Change](#) request if you wish to make that change.
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned from the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Foreign Address

Address Line 1
1313 Mockingbird Lane

Address Line 2

City Mockingbird Heights **State** Washington **Zip** 11111

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Address **Reset** **Cancel**

Your current address information is displayed on the screen for reference.

Type in the appropriate changes in the appropriate fields. The 'State' field is a dropdown list containing an available list of states that can be selected by scrolling through the list and clicking on the appropriate state.

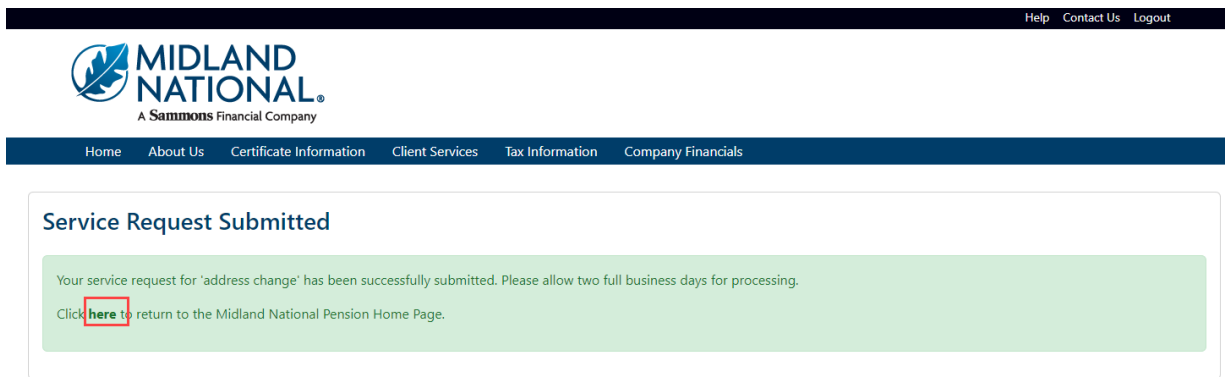
The following fields are required:

- Address Line 1
- City*
- State*
- Zip*

* These required fields are for non-foreign addresses only

3. Once you are finished updating your address information, click on the 'Change Address' button

4. The following screen will be displayed



5. Click on the word 'here' to return to the Home page

6. If you are changing to a 'foreign address', click on the checkbox to the left of the 'Foreign Address' label (displayed in red)

The screenshot shows the "Change Address" form. At the top, it lists instructions for updating address information. Below the instructions, there are two input fields: "Certificate Number" with the value "111111" and "Participant Name" with the value "Herman Munster". A checkbox labeled "Foreign Address" is checked and highlighted in red. Below this, there are input fields for "Address Line 1" (containing "1313 Mockingbird Lane") and "Address Line 2". There are also input fields for "City", "State" (a dropdown menu), and "Zip", all of which are currently grayed out. At the bottom, there are three buttons: "Change Address" (dark blue), "Reset" (yellow), and "Cancel" (yellow). A disclaimer for CA Residents is visible at the bottom left of the form area.

This will make the City, State, and Zip fields display in a gray color and only allow changes to be made in the Address Line 1 and Address Line 2 fields.

7. Click on the 'Change Address' button

8. The following screen will be displayed

The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, a green box contains the following text: "Service Request Submitted" followed by "Your service request for 'direct deposit change' has been successfully submitted. Please allow two full business days for processing." Below this, it says "Click **here** to return to the Midland National Pension Home Page." The word "here" is highlighted with a red box.

9. Click on the word 'here' to return to the Home page

10. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

The screenshot shows the "Change Address" form. At the top, it says "Change Address" and lists instructions. Below the instructions, there are two input fields: "Certificate Number" with the value "111111" and "Participant Name" with the value "Herman Munster". Below these is a checkbox labeled "Foreign Address" which is currently unchecked. Underneath, there are input fields for "Address Line 1" (containing "1313 Mockingbird Lane"), "Address Line 2" (empty), "City" (containing "Mockingbird Heights"), "State" (a dropdown menu showing "Washington"), and "Zip" (containing "11111"). At the bottom, there are three buttons: "Change Address", "Reset" (highlighted with a red box), and "Cancel". A small disclaimer is visible at the bottom left of the form area.

11. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Address

- Provide your updated address information within the fields below and click on the 'Change Address' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Address Line 1
 - City
 - State
 - Zip
- For foreign address changes, click on the checkbox labeled 'Foreign Address' below and submit your change(s) in the appropriate address lines. Street addresses should be on Line 1 and remaining information on Line 2.
- If you are changing your residence state and have elected to withhold state taxes, please be aware that this update will not automatically change your withholding state. You will need to complete a [Withholding Change](#) request if you wish to make that change.
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned from the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Foreign Address

Address Line 1
1313 Mockingbird Lane

Address Line 2

City: Mockingbird Heights State: Washington Zip: 11111


CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Address Reset **Cancel**

Change Phone Number:

1. Click on the 'pencil' icon to the right of the 'Phone' field within the Participant Information section

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Participant Information

Participant Name: Herman Munster		Phone Number: 	Change Address 
Address: 1313 Mockingbird Lane			
City: Mockingbird Heights	State: WA	Zip Code: 11111	
Email: hmunster@gmail.com	Date of Birth: 01/01/1793		

Certificate Information

Certificate Number: 111111	Certificate Type: Single Life	Status: ACTIVE
Normal Retirement Date:	Early Retirement Date:	Disbursement Status: Deferred
(Projected) Payment Amount*: \$500.00	% Non-Taxable:	
Required Commencement Date:	COLA Amount: \$0.00	COLA Percentage: 0.00%

*Amount is based upon the Normal Retirement Date.

Earnings Information

Certificate Number: 111111	Frequency: Monthly	Disbursement Start Date: 10/01/2033
Last Disbursement Date:	Next Disbursement Date:	LTD Gross Disbursement: \$0.00

Print

2. The following screen appears

Change Phone Number

- Provide your updated phone information within the field below and click on the 'Change Phone' button below to submit your changes
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111 **Participant Name** Herman Munster

Phone Number

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Phone](#) [Reset](#) [Cancel](#)

Type in the appropriate changes in the phone number field.

3. Once you are finished updating your phone number, click on the 'Change Phone' button

4. The following screen will be displayed

here to return to the Midland National Pension Home Page.' The word 'here' is highlighted with a red box."/>

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Service Request Submitted

Your service request for 'phone number change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

5. Click on the word 'here' to return to the Home page

6. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

Change Phone Number

- Provide your updated phone information within the field below and click on the 'Change Phone' button below to submit your changes
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111 **Participant Name** Herman Munster

Phone Number

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Phone](#) [Reset](#) [Cancel](#)

7. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Phone Number

- Provide your updated phone information within the field below and click on the 'Change Phone' button below to submit your changes
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Phone Number


CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Phone](#) [Reset](#) [Cancel](#)

Change Bank Information (Direct Deposit):

1. Click on the 'Change Bank Information' button in the upper right corner of the Bank Information section

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Print

Participant Information

Participant Name: Herman Munster		Phone Number: Change Address	
Address: 1313 Mockingbird Lane			
City: Mockingbird Heights	State: WA	Zip Code: 11111	
Email: hmunster@gmail.com	Date of Birth: 01/01/1793		

Certificate Information

Certificate Number: 111111	Certificate Type: Single Life	Status: ACTIVE
Normal Retirement Date:	Early Retirement Date:	Disbursement Status: In Pay
Payment Amount*: \$500.00	% Non-Taxable:	
Required Commencement Date:	COLA Amount: \$0.00	COLA Percentage: 0.00%

*Amount is based upon the Normal Retirement Date.

Bank Information

Bank Name: Bank of Mockingbird Heights		Bank Account Type: Checking	
Bank Routing Number: 111111111	Bank Account Number: 111111111		

[Change Bank Information](#)

2. The following screen appears

Change Direct Deposit

- If adding or changing your bank information, provide your updated bank information within the fields below and click on the 'Change Direct Deposit' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Account Type
 - Routing Number (must be 9 digits and start with either a 0, 1, 2, or 3)
 - Account Number (must be a minimum of 4 digits and has a maximum of 17 digits)
- If removing your bank information (e.g. you no longer wish to receive payments via direct deposit), click on the checkbox labeled 'Remove Direct Deposit' (in red) and click on the 'Change Direct Deposit' button below
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Remove Direct Deposit

Bank Name
Bank of Mockingbird Heights

Account Type
Checking

Routing Number
111111111

Account Number (current ends in 1111)

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Direct Deposit](#) [Reset](#) [Cancel](#)

Your current direct deposit information is displayed on the screen for reference.

Type in the appropriate changes in the appropriate fields. The 'State' field is a dropdown list containing an available list of states that can be selected by scrolling through the list and clicking on the appropriate state. The 'Account Type' field is also a dropdown list that allows you to select Checking or Savings.


The following fields are required:

- Account Type
- Routing Number
- Account Number

3. Once you are finished updating your direct deposit information, click on the 'Change Direct Deposit' button

4. The following screen will be displayed

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Service Request Submitted

Your service request for 'direct deposit change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

5. Click on the word 'here' to return to the Home page

6. If you wish to 'remove' your direct deposit request, click on the checkbox to the left of the 'Remove Direct Deposit' label (displayed in red)

Change Direct Deposit

- If adding or changing your bank information, provide your updated bank information within the fields below and click on the 'Change Direct Deposit' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Account Type
 - Routing Number (must be 9 digits and start with either a 0, 1, 2, or 3)
 - Account Number (must be a minimum of 4 digits and has a maximum of 17 digits)
- If removing your bank information (e.g. you no longer wish to receive payments via direct deposit), click on the checkbox labeled 'Remove Direct Deposit' (in red) and click on the 'Change Direct Deposit' button below
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Remove Direct Deposit

Bank Name
Bank of Mockingbird Heights

Account Type
Checking

Routing Number
111111111

Account Number (current ends in 1111)
[Redacted]


CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Direct Deposit](#) [Reset](#) [Cancel](#)

This will make the fields for the direct deposit display in a gray color. It will also disable the ability to make changes to any of the fields.

7. Click on the 'Change Direct Deposit' button
8. The following screen will be displayed

Help Contact Us Logout



MIDLAND NATIONAL
A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Service Request Submitted

Your service request for 'direct deposit change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

9. Click on the word 'here' to return to the Home page

10. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

Change Direct Deposit

- If adding or changing your bank information, provide your updated bank information within the fields below and click on the 'Change Direct Deposit' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Account Type
 - Routing Number (must be 9 digits and start with either a 0, 1, 2, or 3)
 - Account Number (must be a minimum of 4 digits and has a maximum of 17 digits)
- If removing your bank information (e.g. you no longer wish to receive payments via direct deposit), click on the checkbox labeled 'Remove Direct Deposit' (in red) and click on the 'Change Direct Deposit' button below
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Remove Direct Deposit

Bank Name
Bank of Mockingbird Heights

Account Type
Checking

Routing Number
111111111

Account Number (current ends in 1111)

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Direct Deposit **Reset** Cancel

11. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Direct Deposit

- If adding or changing your bank information, provide your updated bank information within the fields below and click on the 'Change Direct Deposit' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Account Type
 - Routing Number (must be 9 digits and start with either a 0, 1, 2, or 3)
 - Account Number (must be a minimum of 4 digits and has a maximum of 17 digits)
- If removing your bank information (e.g. you no longer wish to receive payments via direct deposit), click on the checkbox labeled 'Remove Direct Deposit' (in red) and click on the 'Change Direct Deposit' button below
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Remove Direct Deposit

Bank Name
Bank of Mockingbird Heights

Account Type
Checking

Routing Number
111111111

Account Number (current ends in 1111)

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Direct Deposit Reset **Cancel**

Beneficiary Change:

1. Click on the 'Change Beneficiary Information' button in the upper right corner of Beneficiary Information section (the button is displayed in the upper right corner for each beneficiary)



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Print

Participant Information

Participant Name: Herman Munster			Phone Number:		
Address: 1313 Mockingbird Lane					
City: Mockingbird Heights		State: WA		Zip Code: 11111	
Email: hmunster@gmail.com			Date of Birth: 01/01/1793		

Change Address

Certificate Information

Certificate Number: 111111	Certificate Type: Single Life	Status: ACTIVE
Normal Retirement Date:	Early Retirement Date:	Disbursement Status: In Pay
Payment Amount*: \$500.00	% Non-Taxable:	
Required Commencement Date:	COLA Amount: \$0.00	COLA Percentage: 0.00%

*Amount is based upon the Normal Retirement Date.

Bank Information

Bank Name: Bank of Mockingbird Heights		Bank Account Type: Checking	
Bank Routing Number: 111111111		Bank Account Number: 111111111	

Change Bank Information

Earnings Information

Certificate Number: 111111	Frequency: Monthly	Disbursement Start Date:
Last Disbursement Date:	Next Disbursement Date:	LTD Gross Disbursement:

Last Disbursement		Year to Date	
Gross Disbursement:		Gross Disbursement:	
Federal W/H: \$0.00		Federal W/H: \$0.00	
State Tax W/H:		State Tax W/H:	
Net Disbursement:		Net Disbursement:	

Beneficiary Information

Beneficiary 1 Name: Eddie Munster				Phone Number:	
Address: 1313 Mockingbird Lane					
City: Mockingbird Heights		State: Washington		Zip Code: 11111	
Relationship: Child	Split: 50.00%	Irrevocable:	Per Stirpes:		

Beneficiary 2 Name:				Phone Number:	
Address: 1313 Mockingbird Lane					
City: Mockingbird Heights		State: Washington		Zip Code: 11111	
Relationship: Other	Split: 50.00%	Irrevocable:	Per Stirpes:		

Change Beneficiary Information

Change Beneficiary Information

Print

2. The following screen appears

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

Add A New Beneficiary

Beneficiary #1

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00
Address 1		Address 2	City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	

Beneficiary #2

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Marilyn		Munster	Other	06/01/1959	XXX-XX-3333	50.00
Address 1		Address 2	City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/ Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/ Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/ Joint Owner has not obtained his/her spouse's signature. Further, the Owner/ Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/ Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Submit Changes **Reset** **Cancel**

If available, your current beneficiary information will be displayed on the screen for reference.

Three options are available to you:

1. Change Existing Beneficiary Information
2. Add a New Beneficiary
3. Remove an Existing Beneficiary

Change Existing Beneficiary Information:

- a. Type in the appropriate changes in the appropriate fields. The 'State' field is a dropdown list containing an available list of states that can be selected by scrolling through the list and clicking on the appropriate state. The 'Relation' field is also a dropdown list that allows you to select the appropriate relationship of the beneficiary.

The following fields are required:

- Last Name
- Relationship

b. Once you are finished updating your beneficiary information, click on the 'Submit Changes' button

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

[Add A New Beneficiary](#)

Beneficiary #1

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00
Address 1	Address 2		City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	

Beneficiary #2

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Marilyn		Munster	Other	06/01/1959	XXX-XX-3333	50.00
Address 1	Address 2		City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	


Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/Joint Owner has not obtained his/her spouse's signature. Further, the Owner/Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

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[Submit Changes](#) [Reset](#) [Cancel](#)

c. The following screen will be displayed

Help Contact Us Logout



A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Service Request Submitted

Your service request for 'beneficiary change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

d. Click on the word 'here' to return to the Home page

Add a New Beneficiary:

a. Click on the 'Add New Beneficiary' button

NOTE: Not all pension plans allow a beneficiary provision. Please refer to your certificate information to determine if a beneficiary can be added.

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

Add A New Beneficiary

Remove Beneficiary

Beneficiary #1							
First Name	MI	Last Name	Relation	DOB	SSN	% Split	
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00	
Address 1	Address 2		City	State	Zip		
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111		

Beneficiary #2

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split	
Marilyn		Munster	Other	06/01/1959	XXX-XX-3333	50.00	
Address 1	Address 2		City	State	Zip		
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111		

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/Joint Owner has not obtained his/her spouse's signature. Further, the Owner/Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

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Submit Changes **Reset** **Cancel**

b. The following screen appears

Beneficiary #3

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split	
			<EMPTY>				
Address 1	Address 2		City	State	Zip		
				<EMPTY>			

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/Joint Owner has not obtained his/her spouse's signature. Further, the Owner/Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Submit Changes **Reset** **Cancel**

A new blank beneficiary section will be displayed (if you have existing beneficiaries) or a blank beneficiary section will display (if no previous beneficiaries). The beneficiary # displayed will be dependent upon the number of beneficiaries currently indicated (e.g. therefore the number displayed will vary).

- c. Type in the appropriate changes in the appropriate fields. The 'State' field is a dropdown list containing an available list of states that can be selected by scrolling through the list and clicking on the appropriate state. The 'Relation' field is also a dropdown list that allows you to select the appropriate relationship of the beneficiary.

The following fields are required:

- Last Name
- Relationship

- d. Once you are finished updating your beneficiary information, click on the 'Submit Changes' button

Beneficiary #3

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
<input type="text"/>	<input type="text"/>	<input type="text"/>	<EMPTY> ▾	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address 1	Address 2	City	State	Zip		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<EMPTY> ▾	<input type="text"/>		

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/Joint Owner has not obtained his/her spouse's signature. Further, the Owner/Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

- e. The following screen will be displayed

Help Contact Us Logout

MIDLAND NATIONAL
A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Service Request Submitted

Your service request for 'beneficiary change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

- f. Click on the word 'here' to return to the Home page

Remove an Existing Beneficiary:

- a. Click on the checkbox to the left of the 'Remove Beneficiary' label (displayed in red)

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

[Add A New Beneficiary](#)

Beneficiary #1

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00

Address 1	Address 2	City	State	Zip
1313 Mockingbird Lane		Mockingbird Heights	Washington	11111

This will make the fields for that beneficiary display in a gray color. It will also disable the ability to make changes to any of the fields.

- b. Click on the 'Submit Changes' button

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

[Add A New Beneficiary](#)

Beneficiary #1

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00

Address 1	Address 2	City	State	Zip
1313 Mockingbird Lane		Mockingbird Heights	Washington	11111

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/JOint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/JOint Owner understands and agrees the Company may presume that no such interest exists if the Owner/JOint Owner has not obtained his/her spouse's signature. Further, the Owner/JOint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/JOint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Submit Changes](#) [Reset](#) [Cancel](#)

c. The following screen will be displayed

The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, a green box contains the following text: "Service Request Submitted" and "Your service request for 'beneficiary change' has been successfully submitted. Please allow two full business days for processing. Click [here](#) to return to the Midland National Pension Home Page." The word "here" is highlighted with a red box.

d. Click on the word 'here' to return to the Home page

4. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

The screenshot shows the "Change Beneficiaries" form. At the top, there are fields for "Certificate Number" (111111) and "Participant Name" (Herman Munster). Below these is a blue "Add A New Beneficiary" button. The form lists two beneficiaries:

- Beneficiary #1:** Eddie Munster, Child, DOB 01/01/1964, SSN XXX-XX-2222, % Split 50.00. Address: 1313 Mockingbird Lane, Mockingbird Heights, Washington, 11111.
- Beneficiary #2:** Marilyn Munster, Other, DOB 06/01/1959, SSN XXX-XX-3333, % Split 50.00. Address: 1313 Mockingbird Lane, Mockingbird Heights, Washington, 11111.

Each beneficiary has a "Remove Beneficiary" checkbox. At the bottom, there are three buttons: "Submit Changes", "Reset" (highlighted with a red box), and "Cancel".

Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/Joint Owner has not obtained his/her spouse's signature. Further, the Owner/Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

5. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Beneficiaries

- If making changes, provide your updated beneficiary information within the fields below and click on the 'Submit Changes' button below
- If adding beneficiaries, click on the 'Add A New Beneficiary' button below, input your information, and click on the 'Submit Changes' button below
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Relationship
- If removing beneficiaries, click on the checkbox labeled 'Remove Beneficiary' (in red) and click on the 'Submit Changes' button below
- If the relationship of the beneficiary is not an individual (e.g. Trust), please input the name information in the last name field only
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name
111111	Herman Munster

Add A New Beneficiary

Beneficiary #1

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Eddie		Munster	Child	01/01/1964	XXX-XX-2222	50.00
Address 1	Address 2		City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	

Beneficiary #2

Remove Beneficiary

First Name	MI	Last Name	Relation	DOB	SSN	% Split
Marilyn		Munster	Other	06/01/1959	XXX-XX-3333	50.00
Address 1	Address 2		City	State	Zip	
1313 Mockingbird Lane			Mockingbird Heights	Washington	11111	

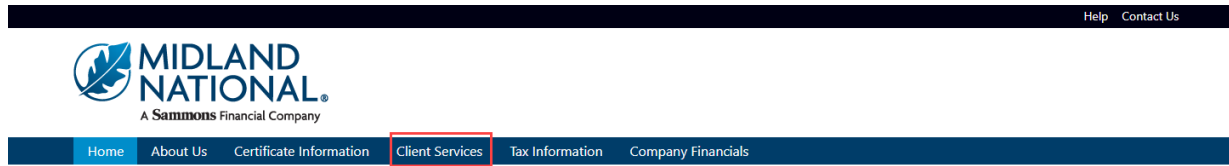
Community Property: If this transaction is subject to a community property or civil union interest, we strongly recommend the Owner/ Joint Owner obtain his/her spouse's signature to document his/her consent to this transaction. The Owner/ Joint Owner understands and agrees the Company may presume that no such interest exists if the Owner/ Joint Owner has not obtained his/her spouse's signature. Further, the Owner/ Joint Owner understands and agrees the Company has no duty to inquire further about any such interest. As a result, the Owner/ Joint Owner agrees to indemnify and hold the Company harmless from any consequences relating to community property or civil union interests and this transaction. Please note that the term "Spouse" includes domestic partner or other partner as permitted by civil union, domestic partnership or similar law. Likewise, the term "civil union" is intended to mean civil union, domestic partnership or other marriage-like arrangement permitted by law.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

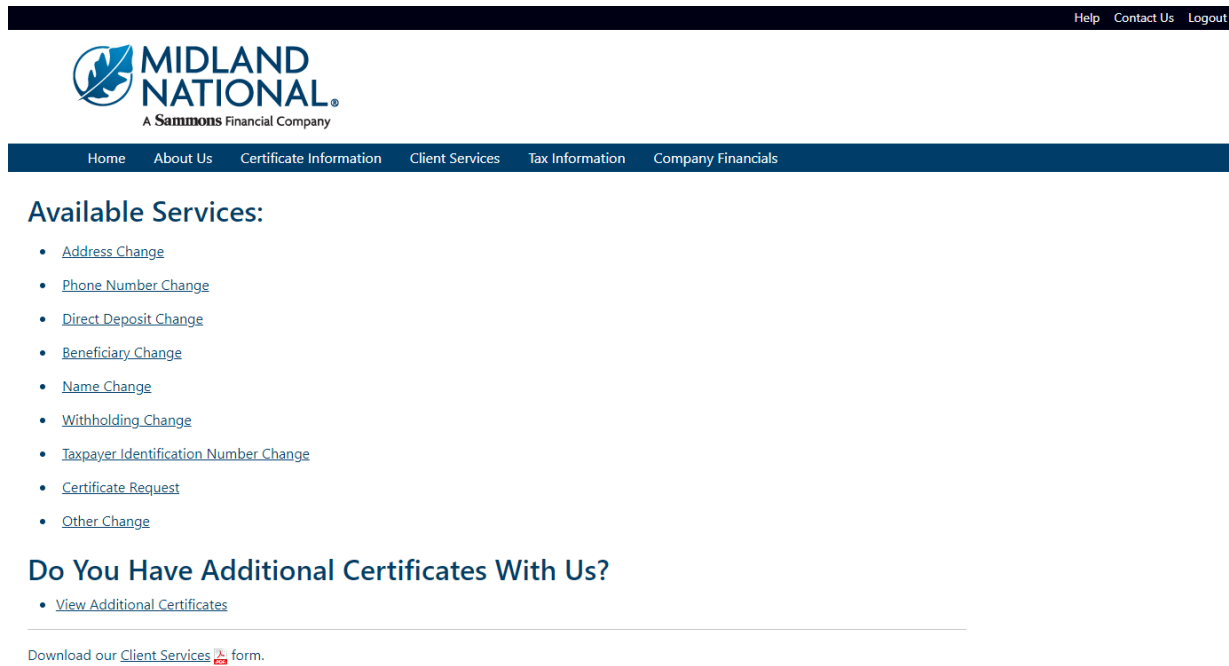
Submit Changes **Reset** **Cancel**

Client Services

1. Click on the Client Services link on the top navigation bar

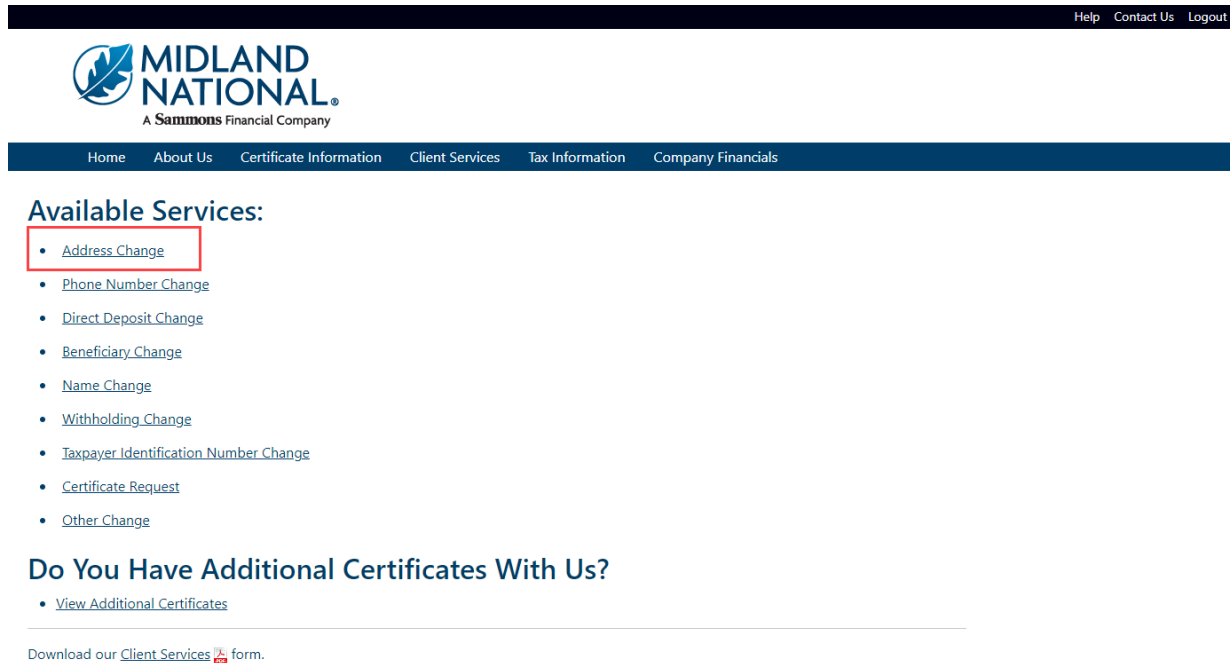


2. The following screen appears



Address Change:

1. Click on the 'Address Change' link



The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, the 'Available Services' section is displayed, with a list of links. The 'Address Change' link is highlighted with a red box. Below this section, there is a heading 'Do You Have Additional Certificates With Us?' and a link to 'View Additional Certificates'. At the bottom, there is a note about downloading a 'Client Services' form.

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Available Services:

- [Address Change](#)
- [Phone Number Change](#)
- [Direct Deposit Change](#)
- [Beneficiary Change](#)
- [Name Change](#)
- [Withholding Change](#)
- [Taxpayer Identification Number Change](#)
- [Certificate Request](#)
- [Other Change](#)

Do You Have Additional Certificates With Us?

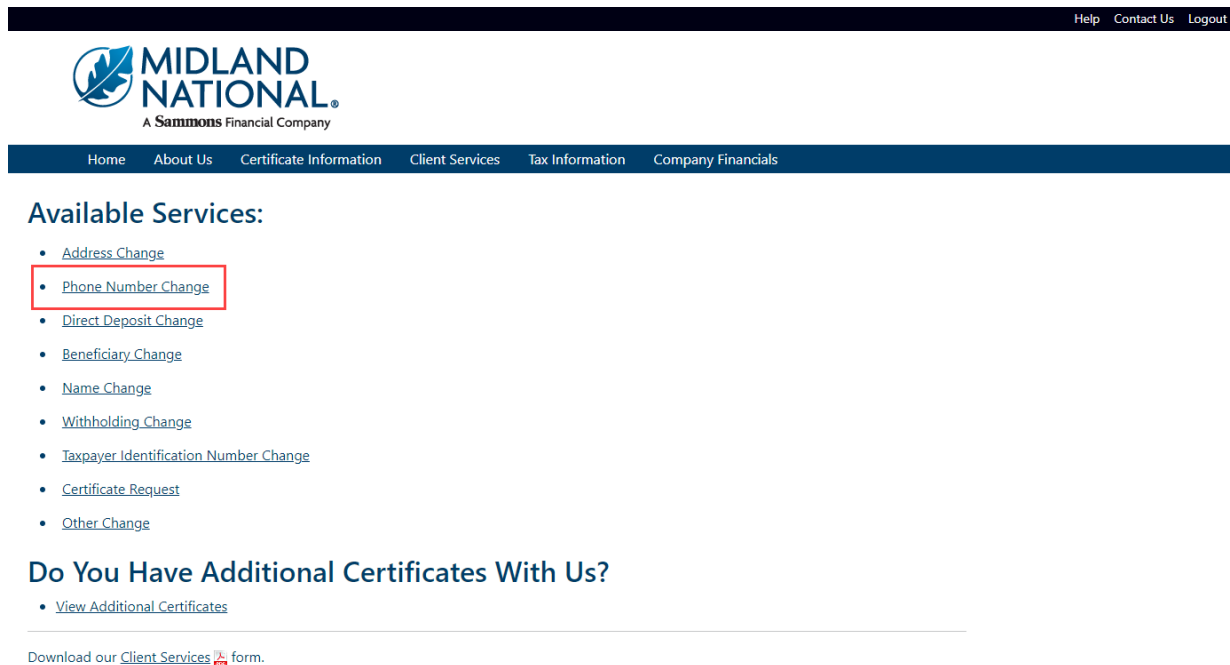
- [View Additional Certificates](#)

Download our [Client Services](#) form.

2. Refer to the [Address Change](#) instructions above for further instructions

Phone Number Change:

1. Click on the 'Phone Number Change' link



The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, the 'Available Services' section is displayed, with a list of links. The 'Phone Number Change' link is highlighted with a red box. Below this section, there is a heading 'Do You Have Additional Certificates With Us?' and a link to 'View Additional Certificates'. At the bottom, there is a note about downloading a 'Client Services' form.

Help Contact Us Logout

MIDLAND NATIONAL
A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Available Services:

- [Address Change](#)
- [Phone Number Change](#)
- [Direct Deposit Change](#)
- [Beneficiary Change](#)
- [Name Change](#)
- [Withholding Change](#)
- [Taxpayer Identification Number Change](#)
- [Certificate Request](#)
- [Other Change](#)

Do You Have Additional Certificates With Us?

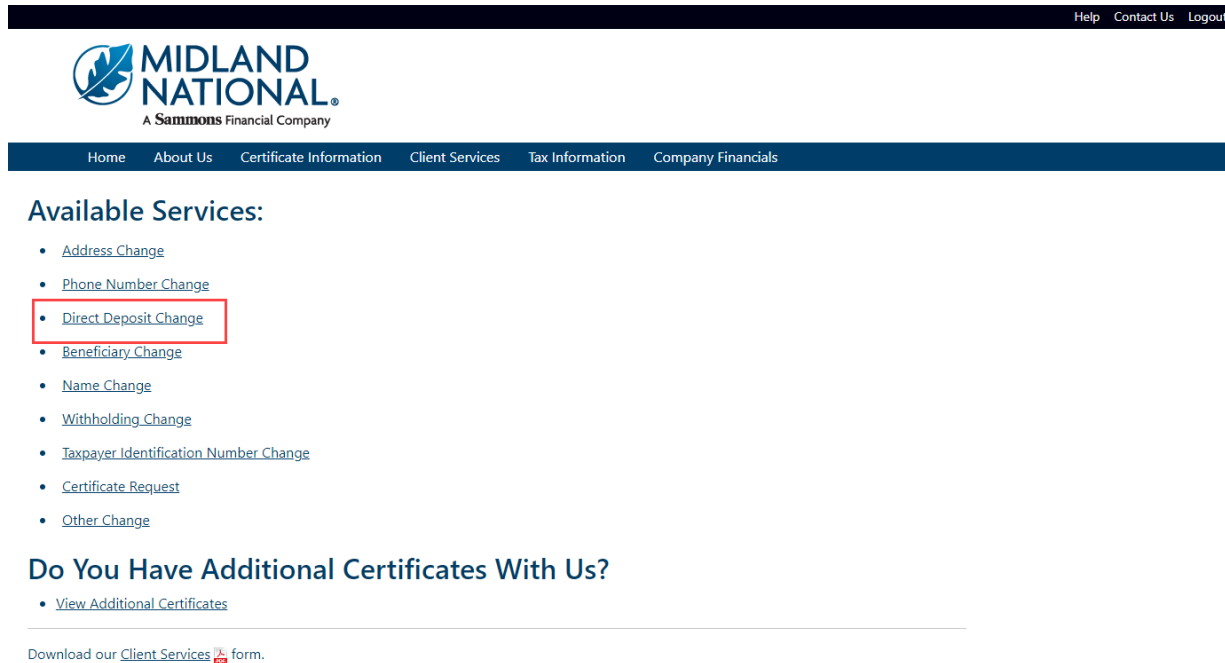
- [View Additional Certificates](#)

Download our [Client Services](#) form.

2. Refer to the [Phone Number Change](#) instructions above for further instructions

Direct Deposit Change:

1. Click on the 'Direct Deposit Change' link

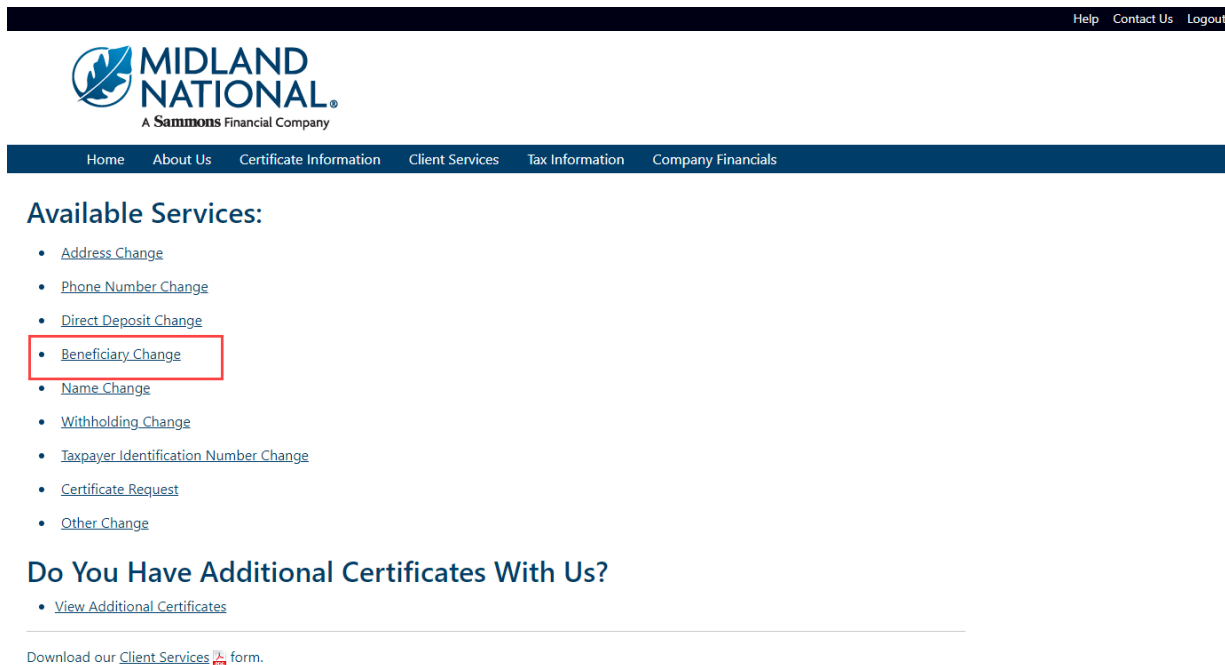


The screenshot shows the Midland National website header with the logo and navigation menu. The 'Available Services' section is visible, with a red box highlighting the 'Direct Deposit Change' link. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

2. Refer to the [Bank Information \(Direct Deposit\) Change](#) instructions above for further instructions

Beneficiary Change:

1. Click on the 'Beneficiary Change' link

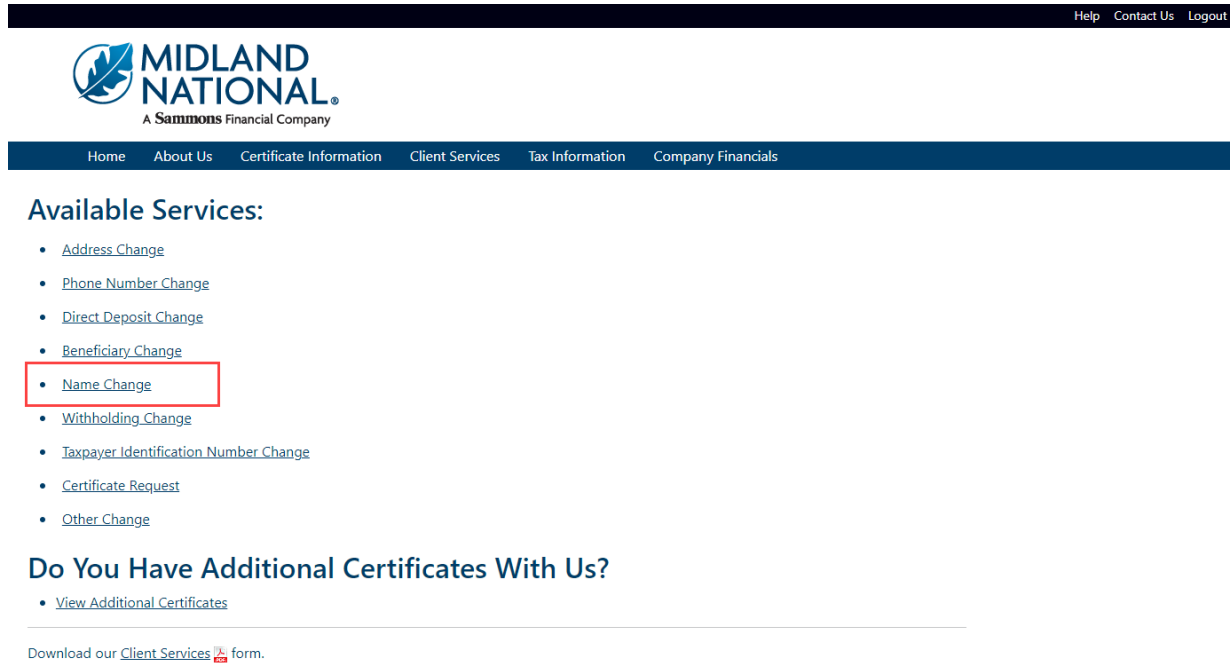


The screenshot shows the Midland National website header with the logo and navigation menu. The 'Available Services' section is visible, with a red box highlighting the 'Beneficiary Change' link. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

2. Refer to the [Beneficiary Change](#) instructions above for further instructions

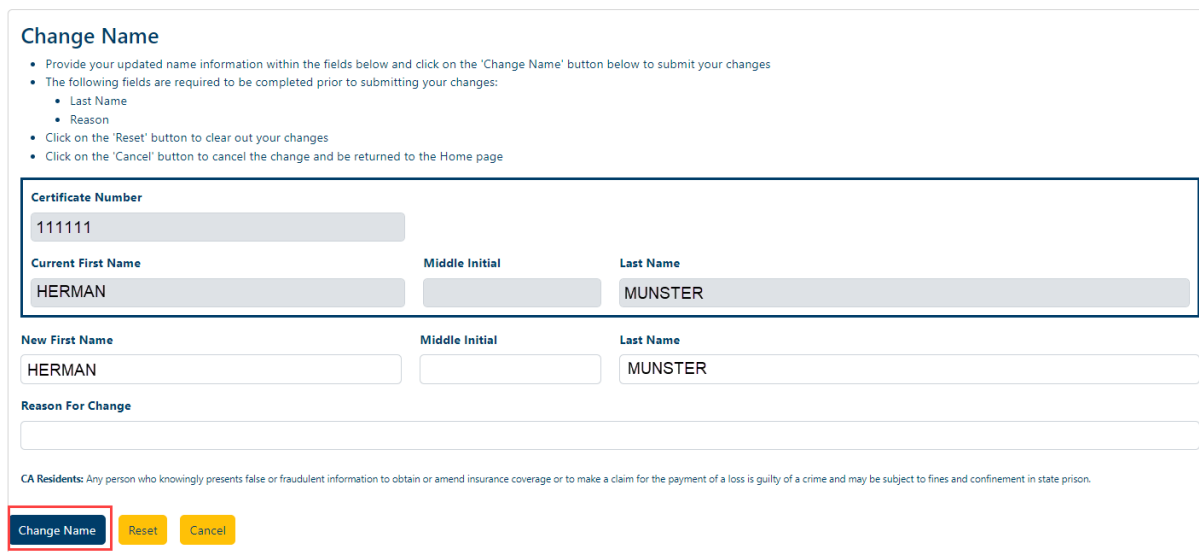
Name Change:

1. Click on the 'Name Change' link



The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, the 'Available Services' section lists various options, with 'Name Change' highlighted by a red box. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

2. The following screen appears



The screenshot shows the 'Change Name' form. It includes instructions, a list of required fields (Last Name and Reason), and input fields for Certificate Number, Current First Name, Middle Initial, Last Name, New First Name, Middle Initial, and Last Name. A 'Reason For Change' field is also present. At the bottom, there are three buttons: 'Change Name' (highlighted with a red box), 'Reset', and 'Cancel'.

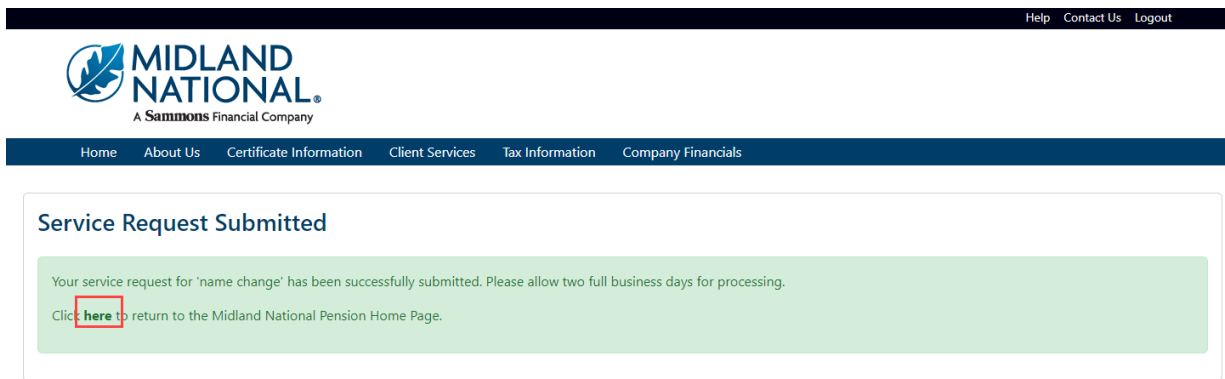
Type in the appropriate changes in the appropriate fields.

The following fields are required:

- Last Name
- Reason For Change

3. Once you are finished updating your name change information, click on the 'Change Name' button

4. The following screen will be displayed



5. Click on the word 'here' to return to the Home page

6. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

Change Name

- Provide your updated name information within the fields below and click on the 'Change Name' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Reason
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number		
111111		
Current First Name	Middle Initial	Last Name
HERMAN		MUNSTER
New First Name	Middle Initial	Last Name
HERMAN		MUNSTER
Reason For Change		

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Name **Reset** Cancel

7. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Name

- Provide your updated name information within the fields below and click on the 'Change Name' button below to submit your changes
- The following fields are required to be completed prior to submitting your changes:
 - Last Name
 - Reason
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number		
111111		
Current First Name	Middle Initial	Last Name
HERMAN		MUNSTER
New First Name	Middle Initial	Last Name
HERMAN		MUNSTER
Reason For Change		

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Change Name **Reset** **Cancel**

Withholding Change:

1. Click on the 'Withholding Change' link

The screenshot shows the Midland National website header with the logo and navigation menu. The 'Available Services' section lists several options, with 'Withholding Change' highlighted by a red box. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

2. The following screen appears

The screenshot shows the 'Change Withholding' form. It includes a title, a list of instructions, and a form with the following fields:

- Certificate Number: 111111
- Participant Name: HERMAN MUNSTER
- Current SSN: XXX-XX-1111

Federal Withholding (select one):

- By Amount:
- By Percentage:

State Withholding (select one):

- State: WASHINGTON
- By Amount: 50.00
- By Percentage:

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Buttons: Change Withholding, Reset, Cancel

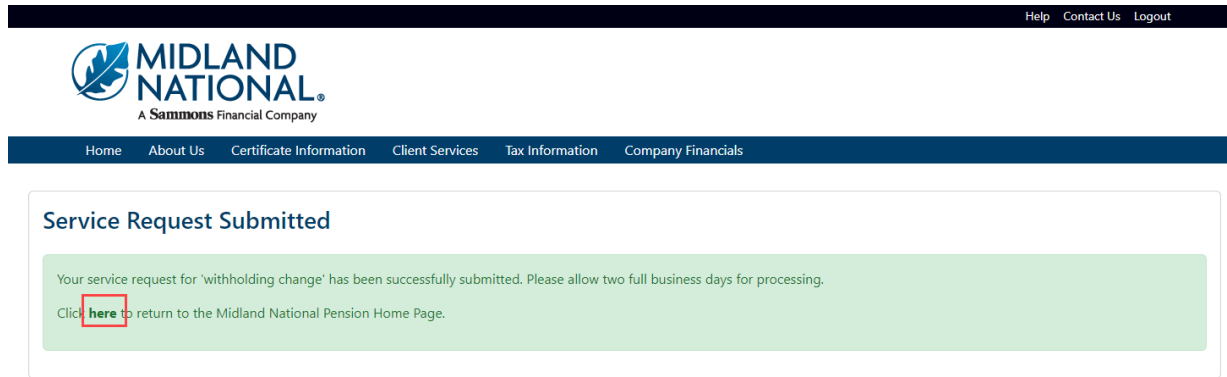
Type in the appropriate changes in the appropriate fields. Either a withholding amount or percentage must be entered but not both. The 'State' field is a dropdown list containing an available list of states that can be selected by scrolling through the list and clicking on the appropriate state.

The following fields are required:

- Either Federal Withholding or State Withholding
- Either Withholding Amount or Percentage (but not both)
- If State Withholding is entered, the State Field is required

3. Once you are finished updating your withholding change information, click on the 'Change Withholding' button

4. The following screen will be displayed



5. Click on the word 'here' to return to the Home page

6. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

The screenshot shows the "Change Withholding" form. At the top, there is a title "Change Withholding" and a list of instructions. Below the instructions, there is a table with three columns: "Certificate Number", "Participant Name", and "Current SSN". The values are "111111", "HERMAN MUNSTER", and "XXX-XX-1111" respectively. Below the table, there are sections for "Federal Withholding (select one):" and "State Withholding (select one):". The "Federal Withholding" section has two options: "By Amount" and "By Percentage". The "State Withholding" section has a "State" dropdown menu set to "WASHINGTON", and two input fields for "By Amount" (containing "50.00") and "By Percentage". At the bottom of the form, there are three buttons: "Change Withholding", "Reset", and "Cancel". The "Reset" button is highlighted with a red box.

7. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Withholding

- Provide your updated withholding information within the fields below and click on the 'Change Withholding' button below to submit your changes
- Either Federal or State Withholding will be required when submitting changes
- You can specify either a dollar amount or a percentage for withholding (but not both)
- For State Withholding, the withholding state is required (NOTE: Not applicable in FL, HI, SD, and TX)
- If you wish to remove your withholding, please input a '0' (zero) in the appropriate field
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page
- If you'd like to complete and submit a W4-P, you can find a copy online at <https://www.irs.gov/pub/irs-pdf/fw4p.pdf>

Certificate Number 111111	Participant Name HERMAN MUNSTER	Current SSN XXX-XX-1111
-------------------------------------	---	-----------------------------------

Federal Withholding (select one):

By Amount

By Percentage

State Withholding (select one):

State

By Amount

By Percentage


CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change Withholding](#) [Reset](#) [Cancel](#)

Taxpayer Identification Number Change:

1. Click on the 'Taxpayer Identification Number Change' link

Help Contact Us Logout



MIDLAND NATIONAL
A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Available Services:

- [Address Change](#)
- [Phone Number Change](#)
- [Direct Deposit Change](#)
- [Beneficiary Change](#)
- [Name Change](#)
- [Withholding Change](#)
- [Taxpayer Identification Number Change](#)
- [Certificate Request](#)
- [Other Change](#)

Do You Have Additional Certificates With Us?

- [View Additional Certificates](#)

Download our [Client Services](#) form.

2. The following screen appears

Change Tax Identification Number (TIN)

- Provide your updated social security number information within the field below and click on the 'Change TIN' button below to submit your changes
- Social Security Number must be in the following format:
 - Must be 9 digits in length
 - Must be in XXX-XX-XXXX format
 - Must include the dashes within the format stated above
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name	Current SSN
111111	Herman Munster	XXX-XX-1111

New SSN

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);
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 that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding;
3. I am a U.S. citizen or other U.S. person as defined by the IRS for federal tax purposes;
4. I am exempt from Foreign Account Tax Compliance Act (FACTA) reporting.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.


[Change TIN](#) [Reset](#) [Cancel](#)

Type in the new social security number including the dashes.

3. Once you are finished updating your social security number information, click on the 'Change TIN' button

4. The following screen will be displayed

Help Contact Us Logout



MIDLAND NATIONAL
A Sammons Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Service Request Submitted

Your service request for 'TIN change' has been successfully submitted. Please allow two full business days for processing.

Click [here](#) to return to the Midland National Pension Home Page.

5. Click on the word 'here' to return to the Home page

6. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button

Change Tax Identification Number (TIN)

- Provide your updated social security number information within the field below and click on the 'Change TIN' button below to submit your changes
- Social Security Number must be in the following format:
 - Must be 9 digits in length
 - Must be in XXX-XX-XXXX format
 - Must include the dashes within the format stated above
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name	Current SSN
111111	Herman Munster	XXX-XX-1111

New SSN

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);
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 that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding;
3. I am a U.S. citizen or other U.S. person as defined by the IRS for federal tax purposes;
4. I am exempt from Foreign Account Tax Compliance Act (FACTA) reporting.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change TIN](#) [Reset](#) [Cancel](#)

7. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Change Tax Identification Number (TIN)

- Provide your updated social security number information within the field below and click on the 'Change TIN' button below to submit your changes
- Social Security Number must be in the following format:
 - Must be 9 digits in length
 - Must be in XXX-XX-XXXX format
 - Must include the dashes within the format stated above
- Click on the 'Reset' button to clear out your changes
- Click on the 'Cancel' button to cancel the change and be returned to the Home page

Certificate Number	Participant Name	Current SSN
111111	Herman Munster	XXX-XX-1111

New SSN

Under penalties of perjury, I certify that:

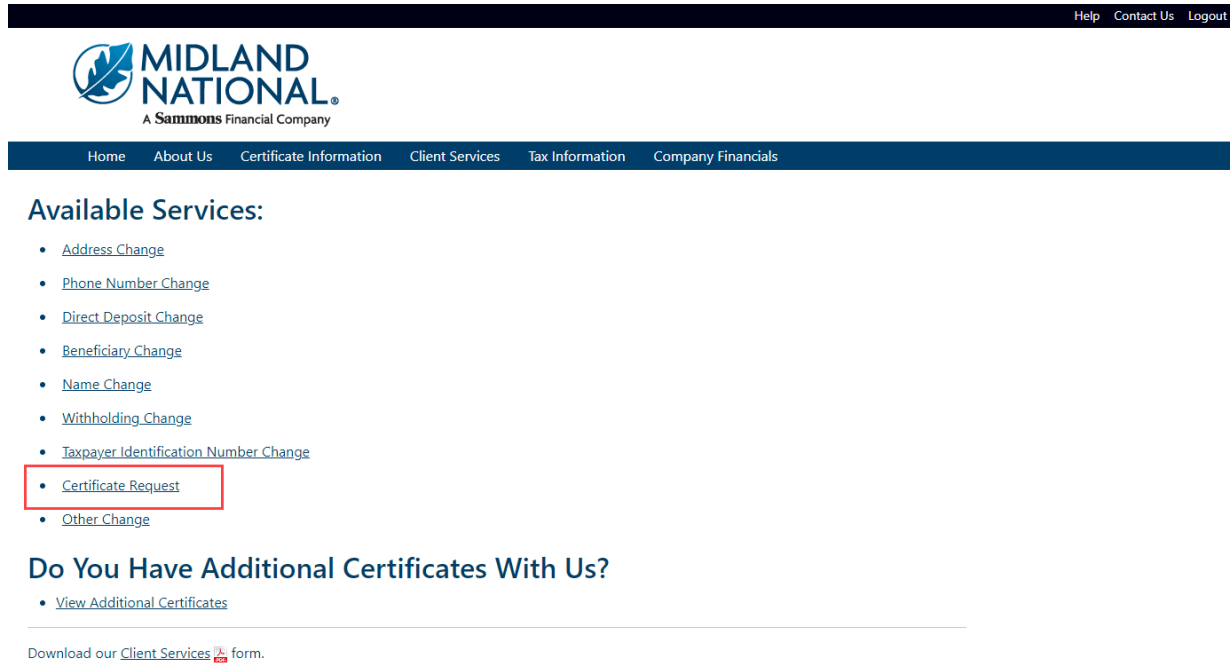
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding;
3. I am a U.S. citizen or other U.S. person as defined by the IRS for federal tax purposes;
4. I am exempt from Foreign Account Tax Compliance Act (FACTA) reporting.

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

[Change TIN](#) [Reset](#) [Cancel](#)

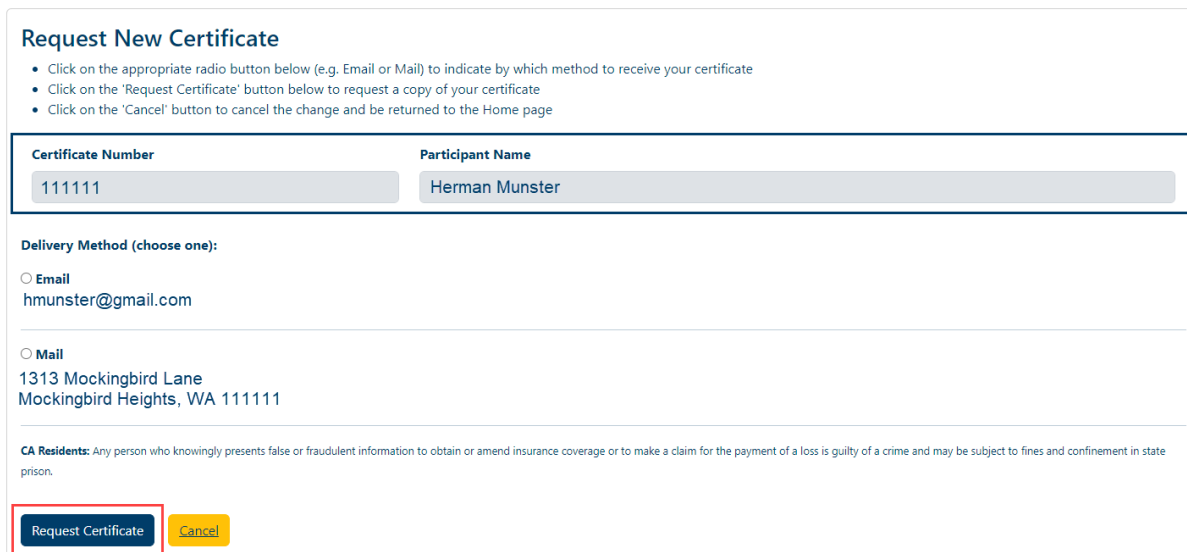
Certificate Request:

1. Click on the 'Certificate Request' link



The screenshot shows the Midland National website header with the logo and navigation menu. The 'Available Services' section lists several options, with 'Certificate Request' highlighted by a red box. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

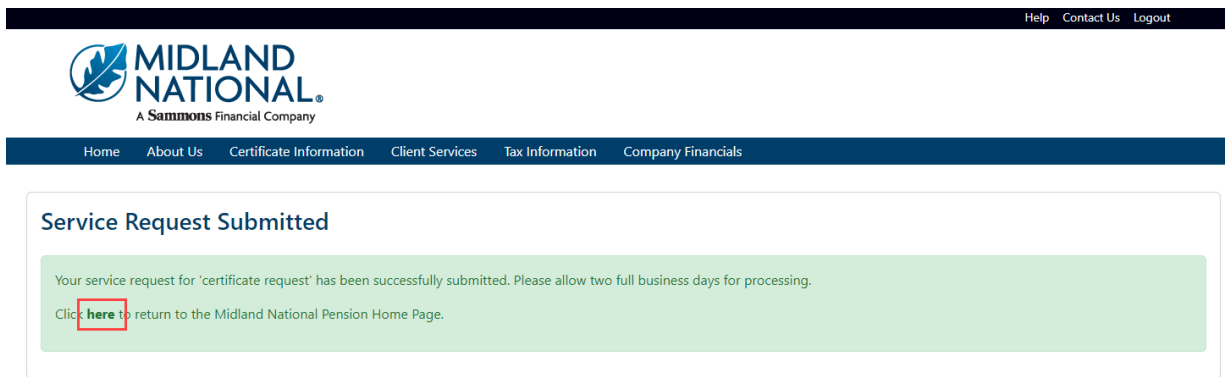
2. The following screen appears



The screenshot shows the 'Request New Certificate' form. It includes instructions on how to use the form, input fields for 'Certificate Number' (111111) and 'Participant Name' (Herman Munster), and radio buttons for 'Email' (selected) and 'Mail'. The 'Request Certificate' button is highlighted with a red box.

3. Click on the appropriate radio button to select the delivery method for your certificate (either Email or Mail)
4. Click on the 'Request Certificate' button

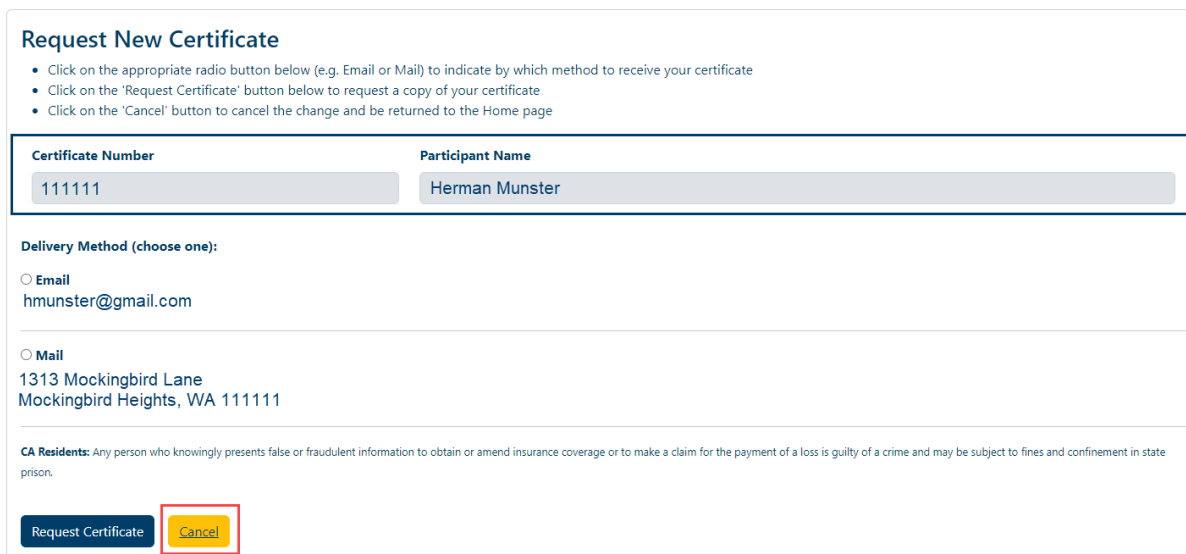
5. The following screen will be displayed



The screenshot shows the top navigation bar with links for Help, Contact Us, and Logout. Below is the Midland National logo, identified as a Sammons Financial Company. A secondary navigation bar includes Home, About Us, Certificate Information, Client Services, Tax Information, and Company Financials. The main content area features a green box with the heading 'Service Request Submitted' and a message: 'Your service request for 'certificate request' has been successfully submitted. Please allow two full business days for processing. Click [here](#) to return to the Midland National Pension Home Page.' The word 'here' is highlighted with a red box.

6. Click on the word 'here' to return to the Home page

7. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button



The screenshot displays the 'Request New Certificate' form. It includes a list of instructions: 'Click on the appropriate radio button below (e.g. Email or Mail) to indicate by which method to receive your certificate', 'Click on the 'Request Certificate' button below to request a copy of your certificate', and 'Click on the 'Cancel' button to cancel the change and be returned to the Home page'. The form contains two input fields: 'Certificate Number' with the value '111111' and 'Participant Name' with the value 'Herman Munster'. Under 'Delivery Method (choose one):', the 'Email' option is selected, with the email address 'hmunster@gmail.com' displayed. The 'Mail' option is unselected, with the address '1313 Mockingbird Lane, Mockingbird Heights, WA 11111' shown. A disclaimer for CA Residents is present. At the bottom, there are two buttons: 'Request Certificate' and 'Cancel', with the 'Cancel' button highlighted by a red box.

Other Request:

1. Click on the 'Other Change' link

The screenshot shows the Midland National website header with the logo and navigation menu. Below the navigation menu, the 'Available Services' section lists several options, with 'Other Change' highlighted by a red box. Below this, there is a section titled 'Do You Have Additional Certificates With Us?' with a link to 'View Additional Certificates'. At the bottom, there is a link to download a 'Client Services' form.

2. The following screen appears

The screenshot shows the 'Other Change Request' form. It includes instructions, input fields for 'Certificate Number' (111111) and 'Participant Name' (Herman Munster), a 'Phone Number' field, and a large 'Description of Request' text area. At the bottom, there are three buttons: 'Submit Request' (highlighted with a red box), 'Reset', and 'Cancel'. A disclaimer for CA Residents is also present.

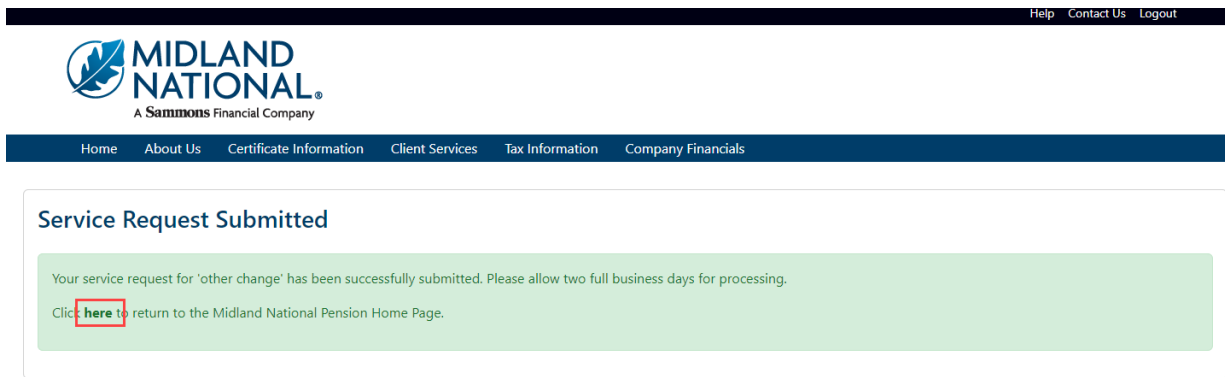
Type in the appropriate changes in the appropriate fields.

The following fields are required:

- Description of Request

3. Once you are finished updating your request information, click on the 'Submit Request' button

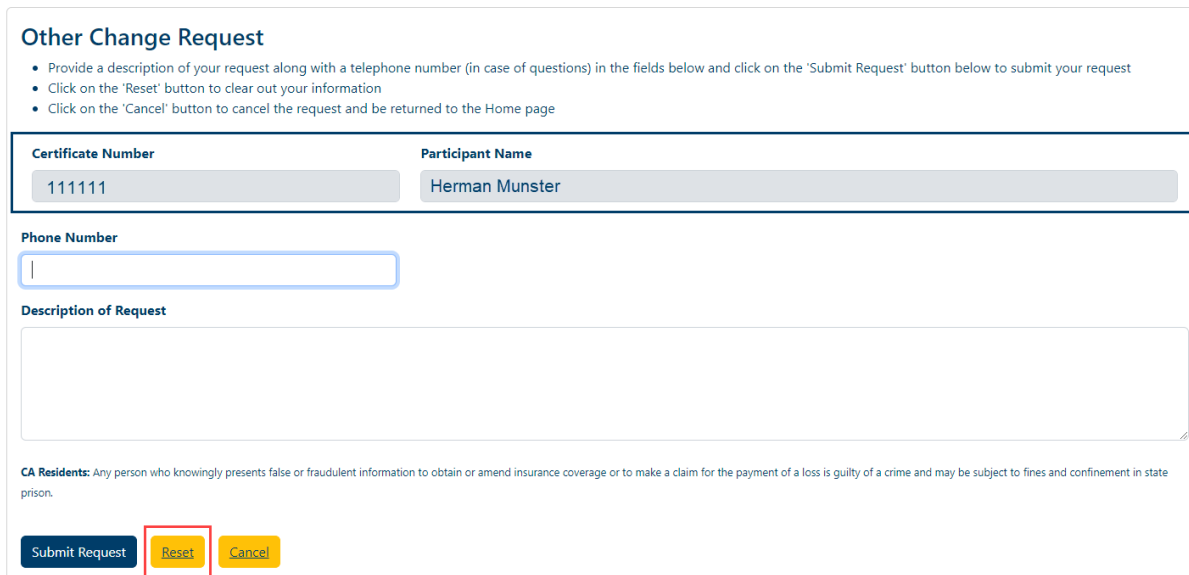
4. The following screen will be displayed



The screenshot shows the Midland National website header with the logo and navigation menu. Below the header, a green box contains the following text: "Service Request Submitted" followed by "Your service request for 'other change' has been successfully submitted. Please allow two full business days for processing." Below this, it says "Click [here](#) to return to the Midland National Pension Home Page." The word "here" is highlighted with a red box.

5. Click on the word 'here' to return to the Home page

6. If you wish to clear out the information you updated prior to submitting the changes, click on the 'Reset' button



The screenshot shows the "Other Change Request" form. It includes a list of instructions: "Provide a description of your request along with a telephone number (in case of questions) in the fields below and click on the 'Submit Request' button below to submit your request", "Click on the 'Reset' button to clear out your information", and "Click on the 'Cancel' button to cancel the request and be returned to the Home page". The form fields are: "Certificate Number" (111111), "Participant Name" (Herman Munster), "Phone Number" (empty), and "Description of Request" (empty). At the bottom, there are three buttons: "Submit Request", "Reset" (highlighted with a red box), and "Cancel". A disclaimer for CA Residents is also present.

8. If you wish to cancel the change and be returned to the Home page, click on the 'Cancel' button

Other Change Request

- Provide a description of your request along with a telephone number (in case of questions) in the fields below and click on the 'Submit Request' button below to submit your request
- Click on the 'Reset' button to clear out your information
- Click on the 'Cancel' button to cancel the request and be returned to the Home page

Certificate Number 111111	Participant Name Herman Munster
-------------------------------------	---

Phone Number


Description of Request

CA Residents: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Download our Form:

1. If you wish to submit your changes on paper and send to us via email, fax, or postal service, click on the 'Client Services link

[Help](#) [Contact Us](#) [Logout](#)



MIDLAND NATIONAL
A Sammons Financial Company

[Home](#) [About Us](#) [Certificate Information](#) [Client Services](#) [Tax Information](#) [Company Financials](#)

Available Services:

- [Address Change](#)
- [Phone Number Change](#)
- [Direct Deposit Change](#)
- [Beneficiary Change](#)
- [Name Change](#)
- [Withholding Change](#)
- [Taxpayer Identification Number Change](#)
- [Certificate Request](#)
- [Other Change](#)

Do You Have Additional Certificates With Us?

- [View Additional Certificates](#)

Download our [Client Services](#) form.

- This will open a PDF document in a separate browser window



Corporate Markets | 4225 38th St. S, Ste. 201, Fargo, ND 58104
 Phone: (833) 496-0546 | Fax: 701-433-6625 | CM-PRT@sfgmembers.com

CLIENT SERVICES REQUEST CHANGE FORM

PLEASE PRINT

Certificate Holder's Name: _____

Certificate Number(s): _____

Phone Number: _____

ADDRESS CHANGE

Current Address: _____

Current City, State, Zip: _____

New Address: _____

New City, State, Zip: _____

DIRECT DEPOSIT (Please include a voided check or deposit slip)

Name of Bank: _____

Bank City, State: _____

Bank Routing #: _____

Bank Account #: _____

Checking Account

Savings Account

ADD OR CHANGE BENEFICIARY(IES)

Beneficiary Name	Split	Relationship	DOB	SSN	Address

Total 100%

If more beneficiaries are needed, please include additional pages.

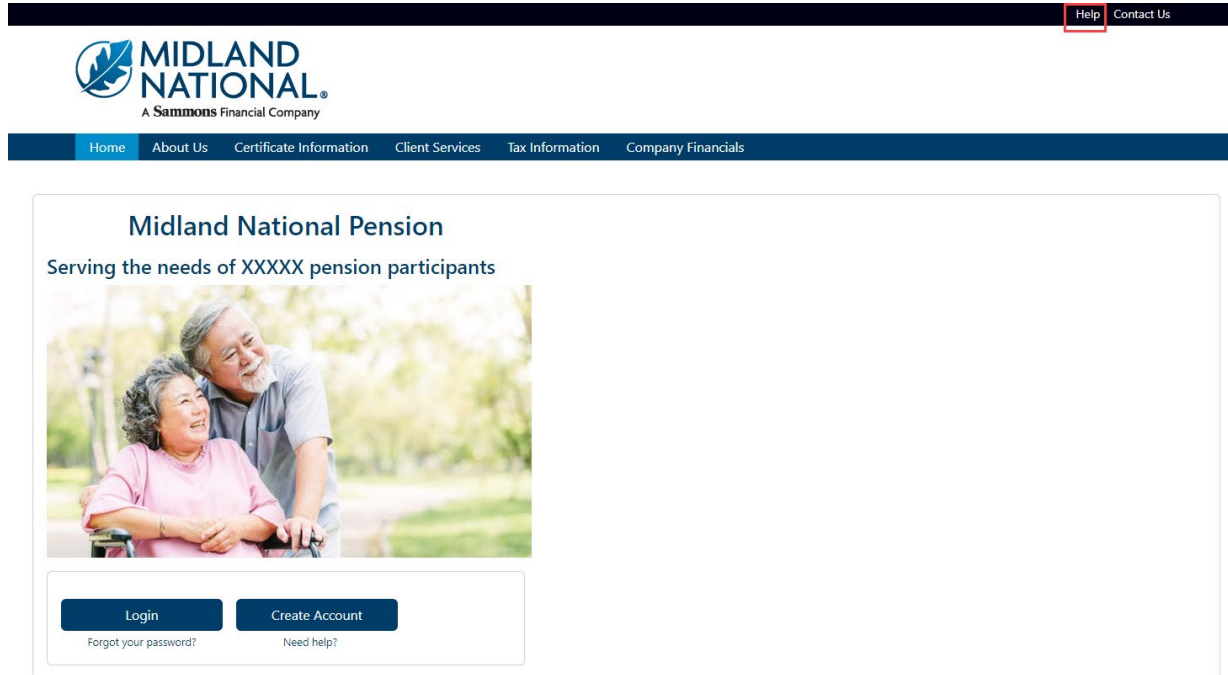
NAME CHANGE

Name of annuitant has changed

- The form is fillable so you can enter your information within this window
- When you have completed your updates within the PDF document, you can 'print' this document following the print instructions available on your computer or 'save' this document following the save instructions on your computer.
- Our [contact information](#) is available at the end of this document

Need Help?

Click on the 'Help' link located in the upper right corner of the Home page to get specific instruction on how to make changes or navigate the website.



The screenshot shows the Midland National Pension website. At the top right, there is a 'Help' link highlighted with a red box, next to a 'Contact Us' link. Below this is the Midland National logo, which includes a stylized leaf icon and the text 'MIDLAND NATIONAL' and 'A Sammons Financial Company'. A dark blue navigation bar contains the following links: Home, About Us, Certificate Information, Client Services, Tax Information, and Company Financials. The main content area features a section titled 'Midland National Pension' with the subtitle 'Serving the needs of XXXXX pension participants'. Below the subtitle is a photograph of an elderly couple walking outdoors. At the bottom of this section, there are two buttons: 'Login' and 'Create Account'. Under the 'Login' button is a link for 'Forgot your password?', and under the 'Create Account' button is a link for 'Need help?'.

If you have questions, you can contact us via phone/fax/email. Our contact information is listed below:

Midland National Pension

4225 38th Street South, Suite 201

Fargo, ND 58104

Toll-Free Phone: 1-833-496-0546


Fax: 1-701-433-6625


Email: CM-PRT@sfgmembers.com

Web Support: CM-PRTWebSupport@sfgmembers.com

Appendix A—Email Confirmation Examples

Address Change:

Thu 4/27/2023 2:23 PM
 cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To  Fritel, Lori
Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'address change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Phone Number Change:

Thu 4/27/2023 1:47 PM
 cmcweb@sfgmembers.com
Midland National Pension Web Site Confirmation

To 
Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'phone number change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 701-433-6472 | Fax: 701-433-8472
cmcweb@sfgmembers.com | www.sfgcorpmarkets.com

Direct Deposit Change:

Thu 4/27/2023 1:55 PM
 cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 
Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'direct deposit change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Beneficiary Change:

 Thu 4/27/2023 1:56 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'beneficiary change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Name Change:

 Thu 4/27/2023 2:00 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'name change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Withholding Change:

 Thu 4/27/2023 2:04 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'withholding change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Taxpayer Identification Number Change:

 Thu 4/27/2023 2:06 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'TIN change' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Certificate Request:

 Thu 4/27/2023 2:07 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!


This email confirms that your service request for 'certificate request' has been successfully submitted. Please allow two full business days for processing.


If you have not completed this request or have any questions, please contact our office.

Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Other Request:

 Thu 4/27/2023 2:10 PM
cm-prt@sfgmembers.com
Midland National Pension Web Site Confirmation

To 

Retention Policy SFG Inbox Final (2 years) Expires 4/26/2025

Hello!

This email confirms that your service request for 'other change' has been successfully submitted. Please allow two full business days for processing.

If you have not completed this request or have any questions, please contact our office.


Our contact information is indicated below:

Midland National Life Insurance Company
4225 38th Street South, Suite 201 | Fargo, ND 58104
Phone: 833-496-0546 | Fax: 701-433-6625
cm-prt@sfgmembers.com | www.midlandnationalpension.com

Appendix B—Pending Request Examples

Address Change:

Help Contact Us Logout



A **Sammons** Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Pending Request Exists


There is a pending 'address change' request on this policy dated 04/27/2023 01:34 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email **Midland National Pension web support**.

Click [here](#) to return to the Midland National Pension Home Page.

Phone Number Change:

Help Contact Us Logout



A **Sammons** Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Pending Request Exists


There is a pending 'phone number change' request on this policy dated 04/27/2023 01:46 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email **Midland National Pension web support**.

Click [here](#) to return to the Midland National Pension Home Page.

Direct Deposit Change:

Help Contact Us Logout



A **Sammons** Financial Company

Home About Us Certificate Information Client Services Tax Information Company Financials

Pending Request Exists

There is a pending 'direct deposit change' request on this policy dated 04/27/2023 01:54 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email **Midland National Pension web support**.

Click [here](#) to return to the Midland National Pension Home Page.

Beneficiary Change:

[Help](#) [Contact Us](#) [Logout](#)



[Home](#) [About Us](#) [Certificate Information](#) [Client Services](#) [Tax Information](#) [Company Financials](#)

Pending Request Exists

There is a pending 'beneficiary change' request on this policy dated 04/27/2023 01:55 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email [Midland National Pension web support](#).

Click [here](#) to return to the Midland National Pension Home Page.

Name Change:

[Help](#) [Contact Us](#) [Logout](#)



[Home](#) [About Us](#) [Certificate Information](#) [Client Services](#) [Tax Information](#) [Company Financials](#)

Pending Request Exists

There is a pending 'name change' request on this policy dated 04/27/2023 01:59 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email [Midland National Pension web support](#).

Click [here](#) to return to the Midland National Pension Home Page.

Withholding Change:

[Help](#) [Contact Us](#) [Logout](#)



[Home](#) [About Us](#) [Certificate Information](#) [Client Services](#) [Tax Information](#) [Company Financials](#)

Pending Request Exists

There is a pending 'withholding change' request on this policy dated 04/27/2023 02:04 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email [Midland National Pension web support](#).

Click [here](#) to return to the Midland National Pension Home Page.

Taxpayer Identification Number Change:

[Help](#) [Contact Us](#) [Logout](#)



[Home](#) [About Us](#) [Certificate Information](#) [Client Services](#) [Tax Information](#) [Company Financials](#)

Pending Request Exists

There is a pending 'TIN change' request on this policy dated 04/27/2023 02:05 PM that is still outstanding. No further requests will be allowed until this has been processed.

If you need further assistance, please email [Midland National Pension web support](#).

Click [here](#) to return to the Midland National Pension Home Page.

Certificate Request:

[Help](#) [Contact Us](#) [Logout](#)



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Pending Request Exists

There is a pending 'certificate request' request on this policy dated 04/27/2023 02:07 PM that is still outstanding. No further requests will be allowed until this has been processed.

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Pending Request Exists

There is a pending 'other change' request on this policy dated 04/27/2023 02:09 PM that is still outstanding. No further requests will be allowed until this has been processed.

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