

INFORMATION REQUEST

Yes

I'd like to know more about United of Omaha Life Insurance Company's insurance plans.

Name _____

Company name _____

Address _____

City _____

State _____ ZIP _____

Telephone _____

Best time to call _____ a.m. _____ p.m.



Mutual of Omaha

**UNITED OF OMAHA LIFE
INSURANCE COMPANY**

A MUTUAL of OMAHA COMPANY

Life insurance and annuities underwritten by **United of Omaha Life Insurance Company**. Policies have exclusions, limitations and reductions. By returning this form you are requesting to have an insurance agent (in WA: producer) contact you by telephone to provide additional information. The underwriting company is solely responsible for its contractual obligation.

LRC5054-1_0411

An insurance agent (in WA: producer) will contact you by telephone.



Mutual of Omaha

**UNITED OF OMAHA LIFE
INSURANCE COMPANY**

A MUTUAL of OMAHA COMPANY

Mutual of Omaha Plaza, Omaha, NE 68175

A NEW WAY
TO THINK
ABOUT LIFE

EASY ANSWERS TO LIFE'S TOUGH QUESTIONS

What will happen to the financial security of **your family** or **your business** if you die unexpectedly? And, if you live beyond your working years, how will your income carry you through retirement



Life insurance from United of Omaha Life Insurance Company can provide the answers to these tough questions and help meet a variety of needs.

- Income for surviving dependents
- Children's education fund
- Mortgage protection
- Retirement income
- Business continuity
- Estate protection

I can help you find the **answers** to life's tough **questions**. Complete and mail the attached reply card.

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