

American General

Life Companies

Foreign Travel or Residence Supplement to Application for Insurance

- American General Life Insurance Company, Houston, TX
- The United States Life Insurance Company in the City of New York, New York, NY
- American General Life Insurance Company of Delaware, Wilmington, DE

Subsidiaries of American International Group, Inc.

In this application, the "Company" refers to the insurance company whose name is checked above.

The insurance company shown above is **solely** responsible for the obligation and payment of benefits under any policy that it may issue. No other company is responsible for such obligations or payments.

1. Name _____

2. Date of Birth _____

3. Place of Birth _____

4. Occupation _____

5. Of what country are you a citizen? _____

6. To what foreign country (or countries) do you intend to travel? _____

7. By what mode of transportation? _____

8. How long do you plan to remain? _____

9. For what purpose is the trip made? (Give full details) _____

10. In what cities will you be located? _____

11. Do you anticipate any flying other than as a passenger on regularly scheduled commercial airlines? (If yes, give full details). _____

I hereby agree that all statements and answers to the above questions are complete and true.

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefit.

Dated at _____ this _____ day of _____ 20 ____

Witness

Signature of Proposed Insured