

# Gift Certificate

**American Income Life  
Insurance Company**

## \$2,000

P.O. Box 2608  
Waco, Texas 76702

## AD&D Policy

Please provide a full year's coverage of a \$2,000 Accidental Death and Dismemberment policy to the following person at no cost, with our compliments.

\_\_\_\_\_  
Name Date of Birth

\_\_\_\_\_  
Sponsor's Name

\_\_\_\_\_  
Street Address Phone

\_\_\_\_\_  
Relationship to Insured

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Beneficiary

\_\_\_\_\_  
Date Certificate Delivered

\_\_\_\_\_  
Relationship to Insured

\_\_\_\_\_  
Agency

\_\_\_\_\_  
Agency Phone

\_\_\_\_\_  
Agent's Signature

You are covered for the year following the date this certificate was delivered by an agent and dated above.  
To obtain your policy, please mail this certificate to the Company at any time within the next year.