



Change the Way You Think About, Purchase and Use Life Insurance

Quality of Life...Insurance®

Your Money. Your Insurance. Your Choice.

Not for use in California.

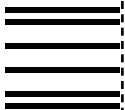


www.qualityoflifeinsurance.com

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8532-DM REV0814

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Phone _____
L.O. _____ Agency _____
(Required for Processing)
8532-DM REV0814



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UNITED STATES

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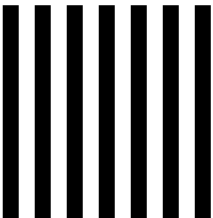
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NASHVILLE TN

POSTAGE WILL BE PAID BY ADDRESSEE

AMERICAN GENERAL
LIFE INSURANCE COMPANY
PO BOX 1900
NASHVILLE TN 37202-9642





What if you suffer a critical or chronic illness and don't die?

Introducing Quality of Life...Insurance.®

Life Insurance you don't have to die to use.

Traditionally, life insurance is designed to help provide security for your loved ones in the event of your premature death. What if you could access your life insurance benefits to help pay the bills while you're still living?

In addition to protecting your loved ones if you should die prematurely, Quality of Life...Insurance® also offers you flexibility to receive benefits during your lifetime. For example, it could potentially provide money for a qualifying illness or condition, for periods of disability when you are unable to work, during retirement or for other needs.

Quality of Life...Insurance®

Your Money. Your Insurance. Your Choice.

- Life insurance to help take care of loved ones
- An Accelerated Benefit Rider to help defray the cost of a qualifying critical illness such as a major heart attack, invasive cancer, or a stroke
- Disability income protection to help pay bills if you are unable to work due to a sickness or an accident
- Potential cash value to supplement retirement income or help offset the costs of life's other milestones

YES! I would like to learn more about **Quality of Life...Insurance®**

American General Life Insurance Company now offers life insurance protection that can pay benefits during your lifetime. It's life insurance you don't have to die to use.

Complete, detach and mail this reply card today.

Name: _____

Signature: _____

Phone Number: _____ Email: _____

The best day and time to call me is: _____

Hour: _____ AM PM (circle one) Date: _____

By submitting this request, I consent to receive telephone calls from American General Life Insurance Company (AGL) and/or its representatives, regarding AGL's products and services, at the telephone number(s) above, including my wireless number if provided, even if such number(s) may appear on a federal or state "do not call" list. I understand these calls may be generated using an automated technology. I also understand that consent to receiving such calls is not required to make a purchase.