



FARMERS LIFE INSURANCE COMPANY

# Marketing Organization Transfer Request Form

## Transfer or Change in Marketing Organization

Full name of agent

Business name (if different than agent's name)

Agent number

Street address

City

State

ZIP

Preferred phone number

Home  Cell

Email

Recruiting agency name

Recruiting agency number

Agent signature

Date signed

Recruiting agency authorized signature

Date signed

To request a Marketing Organization adjustment, agents must follow specific guidelines. If you have not produced paid business with Farmers Life Insurance Company in the last three months, you may request a change or transfer of Marketing Organization by completing this form. If you have produced paid business, you are required to obtain a release from your current Marketing Organization to make such a change.