

OIC HEARING EXHIBITS – GREGG HENDERSON MATTER NO 12-0067

<u>EXHIBIT NUMBER</u>	<u>DESCRIPTION (NUMBER OF PAGES)</u>
1.	1-20-09 EMAIL FROM SHAWN MIHAL TO DICK FALCONE AND BOB SANTONOCITO (1 PAGE)
2.	1-20-09 SIGNED ACKNOWLEDGEMENT OF FALSE INFORMATION STATEMENT BY DICK FALCONE (2 PAGES)
3.	1-23-09 EMAIL FROM SHAWN MIHAL TO DICK FALCONE AND BOB SANTONOCITO (2 PAGES)
4.	CD CONTAINING THE FOLLOWING TWO .WAV FILE RECORDINGS: (1) RECORDING OF GREGG HENDERSON IMPERSONATING DICK FALCONE ON JANUARY 16, 2009 AND (2) RECORDING OF GREGG HENDERSON IMPERSONATING DICK FALCONE ON JANUARY 26, 2009 ASSORTED AVIVA MATERIALS (NO PAGES – ONE CD IN ENVELOPE)
5.	1-30-09 EMAIL FROM SHAWN MIHAL SETTING FORTH 1-26-09 EMAIL TO BILL GAYNOR (2 PAGES)
6.	2-6-09 EMAIL FROM SHAWN MIHAL WITH BUSINESS CARD (2 PAGES)
7.	5-18-09 MEMORANDUM OF ALLISON KRUESSEL (2 PAGES)
8.	7-6-09 LETTER AND 7-7-09 FACSIMILE FROM ALLISON KRUESSEL TO OIC (4 PAGES)
9.	7-20-09 UPDATE MEMORANDUM OF ALLISON KRUESSEL (1 PAGE)
10.	8-8-09 LETTER BY VIC OVERHOLT TO GREGG HENDERSON (6 PAGES)
11.	8-17-09 EMAIL FROM ALLISON KRUESSEL TO VIC OVERHOLT WITH AVIVA PAPERWORK (6 PAGES)
12.	ASSORTED AVIVA RECORDS (10 PAGES)
13.	9-8-09 LETTER FROM ALLISON KRUESSEL TO VIC OVERHOLT WITH FILE AND OTHER DOCUMENTS (163 PAGES)
14.	9-8-09 VIC OVERHOLT MEMORANDUM OF INTERVIEW WITH GREGG HENDERSON (2 PAGES)
15.	GREGG HENDERSON UNDATED STATEMENT TO OIC, APPARENTLY RECEIVED BY VIC OVERHOLT ON 9-9-09 (4 PAGES)

*Tom McDermott
of cc to*

16. GREGG HENDERSON UNDATED STATEMENT TO AVIVA, APPARENTLY RECEIVED BY AVIVA ON 9-9-09 (3 PAGES)
17. 9-14-09 VIC OVERHOLT MEMORANDUM OF INTERVIEW WITH DICK FALCONE (2 PAGES)
18. 9-14-09 VIC OVERHOLT LETTER TO GREGG HENDERSON (4 PAGES)
19. GREGG HENDERSON RESPONSE TO 9-14-09 VIC OVERHOLT LETTER (4 PAGES)
20. 10-16-09 LETTER FROM SHAWN MIHAL TO VIC OVERHOLT (3 PAGES)
21. 10-23-09 LETTER FROM ALLISON KRUESSEL TO VIC OVERHOLT ENCLOSING 10-16-09 SHAWN MIHAL LETTER TO VIC OVERHOLT (4 PAGES)
22. 11-2-09 EMAIL FROM ALLISON KRUESSEL TO VIC OVERHOLT WITH A RECORDING (3 PAGES)
23. 11-19-09 EMAIL FROM ALLISON KRUESSEL TO VIC OVERHOLT WITH A STATEMENT OF CHRISTOPHER NICHOLAS ("NICK") VAN HORN (5 PAGES)
24. 11-19-09 VIC OVERHOLT MEMORANDUM OF INTERVIEW WITH CHRISTOPHER NICHOLAS ("NICK") VAN HORN (2 PAGES)
25. "INVESTIGATIVE FINDINGS" AUTHORED BY VIC OVERHOLT (5 PAGES)
26. DEMAND FOR HEARING BY GREGG HENDERSON

EXHIBIT 1

GREGG HENDERSON MATTER NO 12-0067 / 1029495

1-20-09 EMAIL FROM SHAWN MIHAL TO DICK FALCONE AND BOB SANTONOCITO (1 PAGE)

Mihal, Shawn

From: Mihal, Shawn
Sent: Tuesday, January 20, 2009 6:15 PM
To: 'dickfalcone@comcast.net'
Cc: 'bsanfonodto@gaa.net'
Subject: Acknowledgment of False Information
Attachments: falcone-nick 1-18-09.wav; Acknowledgment of False Information.pdf

Dear Mr. Falcone:

The Great American Advisors, Inc. ("GAA") Compliance Department has been informed that some person purporting to be you placed trades within your brokerage account held through GAA. In addition, it is our understating that you are requesting GAA to reverse the trades that occurred in your account as a result of this unauthorized activity. A copy of the telephone recording associated with these trades is attached to this email for review. Please carefully listen to the telephone recording. I have also included an Acknowledgment of False Information form with this email. Please carefully review this form and, if appropriate, please complete the form and return it to my attention at the address provided below. You may fax or email a copy to me as well; however, GAA will require the originally signed document for our files.

If you have any questions, please feel free to contact me.

Thanks,
Shawn M. Mihal
Chief Compliance Officer
Great American Advisors, Inc.
Member FINRA and SIPC
An SEC Registered Investment Advisor
525 Vine Street, 7th Floor
Cincinnati, OH 45202
(800) 216-3354 Extension 11531
Facsimile: (513) 412-5142
Email: smihal@goadvisors.com

1/23/2009

EXHIBIT 2

GREGG HENDERSON MATTER NO 12-0067 / 1029495

1-20-09 SIGNED ACKNOWLEDGEMENT OF FALSE INFORMATION STATEMENT BY DICK FALCONE (2 PAGES)

DL DF DL



Great American Advisors[®], Inc.
525 Vine Street, 7th Floor
Cincinnati, OH 45202
(800) 216-3354

Acknowledgment of False Information ("Acknowledgement")

I, Richard Phillip Falcone, residing at 14209 119th Place N.E.
Kirkland, Washington 98034-1104, hereby acknowledge and confirm that all of the following are true and correct to the best of my knowledge and belief:

- Some person purporting to be me provided verbal instructions via telephone to Great American Advisors, Inc. ("GAA") to liquidate my brokerage account, [REDACTED] (insert account number), on January 16, 2009 (insert date) ("Trade Instructions").
- I have been provided with a recording of the telephone call received by GAA providing Trade Instructions.
- I have listened to the recording provided by GAA.
- The person(s) providing the Trade Instructions to GAA was not me.
- The person(s) providing the Trade Instructions to GAA did not have my authority or consent to provide such Trade Instructions.
- I do not know the person(s) providing Trade Instructions to GAA.
- I request GAA to cancel the Trade Instructions and restore the positions previously held in my account identified above.

I acknowledge that GAA may incur costs due to the cancellation and correction of the Trade Instructions. If the information provided within this Acknowledgment is untrue, GAA reserves the right to apply the cancellation and correction costs to my account identified above.

Richard P. Falcone
Client Signature

January 20, 2009
Date

[Signature]
Representative Signature

January 20, 2009
Date

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



SEATTLE WA 98101

JAN 26 2009 7:11 PM

Richard P. Falcone
14209 119th Place N.E.
Kirkland, WA 98034

Mr. Shawn M. Mihal
Chief Compliance Officer
Great American Advisors, Inc
525 Vine Street, 7th Floor
Cincinnati, Ohio 45202

RECEIVED

JAN 26 2009

GAA, INC.

452020202 119th Pl NE, Kirkland, WA 98034

EXHIBIT 3

GREGG HENDERSON MATTER NO 12-0067 / 1029495

1-23-09 EMAIL FROM SHAWN MIHAL TO DICK FALCONE AND BOB SANTONOCITO (2 PAGES)

Mihal, Shawn

From: Mihal, Shawn
Sent: Friday, January 23, 2009 4:26 PM
To: 'dickfalcone@comcast.net'
Cc: bsantonocito@gaa.net
Subject: RE: Acknowledgment of False Information
Importance: High

Dear Mr. Falcone:

Pursuant to the signed Acknowledgment of False Information form you faxed to me on January 21, 2009, I wanted to notify you that Great American Advisors, Inc. ("GAA") received account transfer paperwork today from Aviva (American Investors Life Insurance Company, Inc.). The Aviva forms appear to have been signed by you on January 15, 2009. I suspect that the information reported on these forms may have been used by the person who contacted GAA to effect the liquidations in your GAA account. In light of this information received by GAA, will you please provide the following information?

1. Please inform me if you wish to proceed with the instructions provided in the Aviva Request for Funds transfer paperwork. This would require GAA to liquidate your account and send the proceeds to Aviva.
2. Please provide me with the name, contact information, etc. of the individual you worked with to complete the Aviva Request for Funds transfer paperwork.

If you have any questions, please feel free to contact me.

Thanks,
Shawn M. Mihal
Chief Compliance Officer
Great American Advisors, Inc.
Member FINRA and SIPC
An SEC Registered Investment Advisor
525 Vine Street, 7th Floor
Cincinnati, OH 45202
(800) 216-3354 Extension 11531
Facsimile: (513) 412-5142
Email: smihal@guadvisors.com

From: dickfalcone@comcast.net [mailto:dickfalcone@comcast.net]
Sent: Tuesday, January 20, 2009 7:52 PM
To: Mihal, Shawn
Cc: bsantonocito@gaa.net
Subject: Re: Acknowledgment of False Information

Mr Bob Santonocito and Mr Shawn M. Mihal Chief Compliance Officer,
I hereby advise you both that the voice on your tape was not that of Richard P Falcone.

I have downloaded your "Acknowledgement of False Information" and will forward it to your office immediately.
I will send you this signed copy by Fax at my time Wednesday approx 10 AM. I do not own a Fax machine.

1/23/2009

Thank you both in advance for your generous and kind attention to this matter.

Richard P. Falcone

PS: If there is anything else you need please contact me at your earliest convenience.

— Original Message —

From: "Shawn Mihai" <SMihai@gadvisors.com>
To: dickfalcone@comcast.net
Cc: bsantonocito@gaa.net
Sent: Tuesday, January 20, 2009 3:15:14 PM (GMT-0800) Auto-Detected
Subject: Acknowledgment of False Information

Dear Mr. Falcone:

The Great American Advisors, Inc. ("GAA") Compliance Department has been informed that some person purporting to be you placed trades within your brokerage account held through GAA. In addition, it is our understanding that you are requesting GAA to reverse the trades that occurred in your account as a result of this unauthorized activity. A copy of the telephone recording associated with these trades is attached to this email for review. Please carefully listen to the telephone recording. I have also included an Acknowledgment of False Information form with this email. Please carefully review this form and, if appropriate, please complete the form and return it to my attention at the address provided below. You may fax or email a copy to me as well; however, GAA will require the originally signed document for our files.

If you have any questions, please feel free to contact me.

Thanks,
Shawn M. Mihai
Chief Compliance Officer
Great American Advisors, Inc.
Member FINRA and SIPC
An SEC Registered Investment Advisor
525 Vine Street, 7th Floor
Cincinnati, OH 45202
(800) 216-3354 Extension 11531
Facsimile: (513) 412-5142
Email: smihai@gadvisors.com

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1/23/2009

EXHIBIT 4

GREGG HENDERSON MATTER NO 12-0067 / 1029495

CD CONTAINING THE FOLLOWING TWO .WAV FILE RECORDINGS: (1) RECORDING OF GREGG HENDERSON IMPERSONATING DICK FALCONE ON JANUARY 16, 2009 AND (2) RECORDING OF GREGG HENDERSON IMPERSONATING DICK FALCONE ON JANUARY 26, 2009 ASSORTED AVIVA MATERIALS (NO ~~PAGES~~ ~~ONE CD IN ENVELOPE~~)

OK

EXHIBIT 5

GREGG HENDERSON MATTER NO 12-0067 / 1029495

1-30-09 EMAIL FROM SHAWN MIHAL SETTING FORTH 1-26-09 EMAIL TO BILL GAYNOR (2 PAGES)

↓
— a/c to

McDaniel, Tom

From: Shawn Mihal/CINCINNATI/AAG@AAG@AFG
Sent: Friday, January 30, 2009 4:09 PM
To: McDaniel, Tom
Cc: Gaynor, William
Subject: FW: Suspected Fraud

Hi Tom:

Per a discussion I had with Bill Gaynor, wav files containing the conversations with Dick Falcone are attached. The outgoing calls from me to Mr. Falcone on 1/26/09 are believed to be the actual client. The other incoming calls on 1/16/09 and 1/26/09 are believed to be the person impersonating Mr. Falcone. If you have any questions, please feel free to contact me.

Thanks,
Shawn M. Mihal
Chief Compliance Officer
Great American Advisors, Inc.
Member FINRA and SIPC
An SEC Registered Investment Advisor
(800) 216-3354 Extension 11531
Facsimile: (513) 412-5142

Email: smihal@gaadvisors.com <BLOCKED::mailto:smihal@gaadvisors.com>

From: Mihal, Shawn
Sent: Monday, January 26, 2009 5:36 PM
To: Gaynor, Bill
Subject: Suspected Fraud

Bill:

Per our conversation, GAA has reason to believe that an account held with Pershing through GAA has been the subject of attempted fraud. The account (██████████) is registered to Richard (Dick) Falcone. On January 16, 2009, the GAA Trade Desk received a call from a person reporting to be Mr. Falcone. This person requested liquidation of all of the positions held in the aforementioned account. The person had all appropriate personal information (name, account number, last four SSN digits, etc.) to effect the trades. As such, GAA followed the instructions. Trade confirmations were issued by Pershing to Mr. Falcone's address of record. Upon receipt of the trade confirmations on January 20, 2009 Mr. Falcone and his GAA Registered Representative, Bob Santonocito, contacted GAA to report that they had not entered the trade orders. GAA pulled the telephone recording to verify that the trades were placed by the client within the appropriate account. Mr. Falcone was provided with an opportunity to review the recorded telephone call. Subsequently, Mr. Falcone reported that the person placing the trade orders was not him. GAA promptly sent an Acknowledgment of False

Information form to Mr. Falcone and Mr. Santonocito for review and execution (attached). Upon receipt of the completed Acknowledgment of False Information form, GAA canceled the trade orders placed on January 16, 2009 and restored the account as if the trades had not occurred.

On January 23, 2009, GAA received account transfer paperwork from Aviva (American Investors Life Insurance Company, Inc.). The Aviva forms were signed by Mr. Falcone on January 15, 2009. I suspect that the information reported on these forms may have been used by the person who contacted GAA to effect the liquidations in Mr. Falcone's GAA account. Based on the information reported on the Acknowledgment of False Information form, I emailed Mr. Falcone on January 23, 2009 to confirm that he did not want to proceed with the transfer instructions. Mr. Falcone responded to my email and confirmed that he did not want to transfer his account/funds.

On January 26, 2009 at approximately 10:15 a.m. EST, I contacted Mr. Falcone on his home telephone number and discussed the information we received. Mr. Falcone reported that at the age of 70 he has some intermittent memory loss (mild Alzheimer's). He stated that he met with an insurance sales person on January 15, 2009, but he did not remember signing transfer paperwork. He stated that he does not want to transfer his account from GAA. He also stated that while he may have signed some forms on January 15, 2009, he did not give anyone consent to impersonate him and effect trades in his account.

On January 26, 2009 at approximately 11:20 a.m. EST, GAA's Trade Desk received another call from someone reporting to be Mr. Falcone. The call was transferred to me. The caller identified himself as Dick Falcone and provided Mr. Falcone's account number and that he wanted to check on the liquidation of a bond position in the account. The voice was distinctly different than that of Mr. Falcone's from our conversation an hour earlier that same day. When I reminded the caller that he and I had a conversation an hour earlier he seemed surprised and then reported that "he was previously an alcoholic and he often forgets things". The caller then asked me to explain what we talked about previously. I informed the caller that I did not believe that he is Mr. Falcone and that I had reason to believe that he is an insurance agent that acquired Mr. Falcone's personal information and is using the information inappropriately to gain access to the account held through GAA. The caller immediately disconnected the call with me.

On January 26, 2009 at approximately 11:30 a.m. EST, I called Mr. Falcone to report the call I had received a few minutes earlier. Mr. Falcone stated that within the past five minutes the insurance agent he met with on January 15, 2009 had tried to call him on his home and cell phones. Mr. Falcone said he let the calls go to voicemail. Mr. Falcone also stated that he did not make the 11:20 a.m. call and that he wishes to keep all of his positions intact in his GAA account. Mr. Falcone further reported the insurance agent he worked with on January 15, 2009 to be Greg Henderson (telephone number 206-354-1321).

Please forward this on to the appropriate department to initiate a review of the suspected fraud. If you need any further information, please feel free to contact me.

Thanks,
Shawn M. Mihal
Chief Compliance Officer
Great American Advisors, Inc.
Member FINRA and SIPC
An SEC Registered Investment Advisor
(800) 216-3354 Extension 11531
Facsimile: (513) 412-5142



EXHIBIT 6

GREGG HENDERSON MATTER NO 12-0067 / 1029495

2-6-09 EMAIL FROM SHAWN MIHAL WITH BUSINESS CARD (2 PAGES)

McDaniel, Tom

From: Shawn Mihal/CINCINNATI/AAG@AAG@AFG
Sent: Friday, February 06, 2009 7:06 PM
To: McDaniel, Tom
Cc: Gaynor, William
Subject: FW: A fax has arrived from remote ID '641 7954360'.

Hi Tom:

I received this from Richard Falcone today.

Thanks,
Shawn

-----Original Message-----

From: GAA Compliance
Sent: Friday, February 06, 2009 2:50 PM
To: Mihal, Shawn
Subject: FW: A fax has arrived from remote ID '641 7954360'.

-----Original Message-----

From: Fax Gateway [mailto:RFAX@10.48.22.9]
Sent: Friday, February 06, 2009 1:39 PM
To: GAA Compliance
Subject: A fax has arrived from remote ID '641 7954360'.

A fax has arrived from remote ID '641 7954360'.

Time: 2/6/2009 1:37:28 PM
Received from remote ID: 641 7954360
Inbound user ID COMPLIANCE, routing code 4125142
Result: (0/382/0/0) Successful Send
Page record: 1 - 1



ACDEF65.TIF

Elapsed time: 01:18 on channel 7

S. Adams,

I just found the local of the
Rep. in the Falcone case

Retirement Protection Services, LLC

Gregg Henderson
President

WA. Ins. License # 192314
OR. Ins. License # 897518

(206) 354-1321
20900 NE 42nd St. Sammamish, WA 98074
Email: safeinvestment@comcast.net

Reservation Phone: 800-769-1617

EXHIBIT 7

GREGG HENDERSON MATTER NO 12-0067 / 1029495

5-18-09 MEMORANDUM OF ALLISON KRUESSEL (2 PAGES)

CONFIDENTIAL
INVESTIGATIVE SERVICES REPORT

AMERICAN
FINANCIAL
GROUP, INC.

DATE: May 18, 2009

CASE #: A9-007

FROM: Ali Kruessel
Security Specialist I

REPORT: First

DATE REPORTED: 1/29/2009

OFFICE: Cincinnati

TO: Distribution

SUBJECT: Richard P. Falcone, victim

EXPOSURE: Unknown

AGENT: Gregg A. Henderson

LOCATION: Kirkland, WA

SYNOPSIS

Bill Gaynor, GAFRI Legal Department, reported to Investigative Services that Richard P. Falcone, Great American Advisors client, might have been impersonated in an attempt to facilitate a fraudulent financial transaction on his brokerage account.

CASE CONCLUSION TO DATE

- Investigative efforts determined that a man claiming to be Richard P. Falcone, GAA client, contacted the Trade Desk to request liquidation of his brokerage account. Upon GAA's mandatory follow up with Falcone, the client stated that he did not recall the account liquidation request.
- Investigative Services determined that Falcone had met with financial advisor Gregg A. Henderson prior to the calls received by the Trade Desk. Falcone stated that he did not recall completing the paperwork necessary to initiate a transfer of the funds in his GAA account to another company. In addition, our investigation determined that the day after Falcone met with Henderson, the first of two calls was received at the Trade Desk requesting liquidation of Falcone's account.
- Investigative Services interviewed Gregg Henderson. Henderson at first refused to cooperate in our investigation, then denied having any interaction with Falcone. Henderson later admitted meeting with Falcone and alleged that Falcone initiated the account liquidation. Henderson denied any improper actions involving Falcone's account.
- Our examination of the recorded conversations with the GAA Trade Desk determined the caller was not Richard Falcone.

ADDITIONAL FINDINGS

- Gregg A. Henderson holds active appointments with GALIC, AILIC and LOYAL.

STATUS

- Our findings will be referred to the Washington Department of Insurance. Our findings have also been referred to GAFRI management for their review.

NEXT REPORT

- Our next report will be issued when additional information becomes available.

DISTRIBUTION

Bob Dobbs
Bill Gaynor
Jim Henderson
Jim Kennedy
Tom McDaniel
Shawn Mihal
Mark Muething

Please address comments or questions to the assigned investigator – Alli Kruessel, akruessel@gaic.com. Investigative details are housed in Investigative Services.

EXHIBIT 8

GREGG HENDERSON MATTER NO 12-0067 / 1029495

7-6-09 LETTER AND 7-7-09 FACSIMILE FROM ALLISON KRUESSEL TO OIC (4 PAGES)

**AMERICAN
FINANCIAL**
GROUP, INC.

INVESTIGATIVE SERVICES
525 VINE STREET, 14TH FLOOR
CINCINNATI, OH 45202

CONFIDENTIAL FACSIMILE TRANSMITTAL SHEET

TO:	Fraud Investigation	FROM:	Allison M. Kruessel
COMPANY:	Washington State Office of the Insurance Commissioner	DATE:	7/7/2009
FAX NUMBER:	360-586-2020	TOTAL NO. OF PAGES INCLUDING COVER:	4
PHONE NUMBER:	360-725-7263	SENDER'S REFERENCE NUMBER:	
RE:	Suspected Fraud Referral	YOUR REFERENCE NUMBER:	

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

Good Afternoon,

I am a fraud investigator for American Financial Group, Inc., based in Cincinnati, OH. Please find attached a suspected agent fraud referral. If you have any questions or need additional documentation, please let me know.

Thank you,



Alli Kruessel
Security Specialist I

Alli Kruessel
American Financial Group
Investigative Services - Security Specialist I
525 Vine Street, 14th Floor
Cincinnati, OH 45202
akruessel@afic.com

513-333-5545

FAX 513-369-7109

CELL 513-807-4056

GREAT AMERICAN INSURANCE COMPANIES • AMERICAN EMPIRE GROUP • MID-



Investigative Services
525 Vine Street, 14 East
Cincinnati, OH 45202

Allison M. Kruessel
Security Specialist I
(513) 333-5545 fax (513) 368-7109
akruessel@galc.com

Sent by fax to (360)586-2020

July 6, 2009

Washington State Office of the Insurance Commissioner
P.O. Box 40257
Olympia, WA 98504-0257

Dear Fraud Division,

I am a fraud investigator with the Investigative Services Unit of American Financial Group, Inc. American Financial Group, Inc. is the holding company for Great American Financial Resources, Inc., which includes Great American Advisors.

Please review the following for the elements of a regulatory or criminal offense involving elder fraud that might have been committed by Washington insurance agent Gregg A. Henderson.

SUMMARY

Our investigation determined that an individual believed to be Washington insurance agent Gregg A. Henderson (WAOIC agent license number 193414) might have impersonated Richard P. Falcone, an elderly GAA client, in an attempt to liquidate Falcone's GAA brokerage account to transfer the funds to another carrier.

INVESTIGATION

On January 27, 2009, GAA management contacted Investigative Services and reported that some suspicious activity had occurred on the brokerage account of Richard P. Falcone, GAA client.

~~It was reported that on January 16, 2009, an individual purporting to be Falcone called GAA and requested liquidation of a GAA brokerage account and provided all of the necessary personal information to do so. Upon GAA's mandatory follow-up with Falcone, it was learned that Falcone did not recall the account liquidation request. At this point, Falcone was provided with, and completed, the appropriate paperwork to cancel the liquidation order and the account was restored.~~

On January 23, 2009, GAA received account transfer paperwork from AVIVA (American Investors Life Insurance Company, Inc.). The AVIVA forms were signed by Falcone on January 15, 2009 and contained the information necessary to contact GAA and attempt to liquidate the account. Falcone confirmed via e-mail with GAA management that he did not want to transfer his account.

On January 26, 2009, Falcone was interviewed by a representative of our company, Shawn Mihal. Falcone stated that he was 70 years old and has some intermittent memory loss and acknowledged meeting with an insurance sales person on January 15, 2009 but did not recall signing transfer paperwork. He also acknowledged that while he might have signed some forms during this meeting, he did not give consent for anyone to impersonate him and effect trades on his account.

Later on January 26, 2009, Mihal received an additional call from someone reporting to be Mr. Falcone. The caller identified himself as Dick Falcone and said that he wanted to check on the liquidation of an account. The voice of the caller was noticeably different from that of Mr. Falcone's from the earlier conversation that day. Upon a reminder by Mihal that they had spoken earlier that day, the Mr. Falcone on the phone expressed surprise and then reported that he was an alcoholic and often forgets things. The caller requested a reminder about what was previously discussed. At this point, Mihal told the caller he did not believe him to be the real Mr. Falcone and that he believed the caller was an insurance agent that acquired Falcone's personal information and was using it to illegally gain access to the brokerage account held with GAA. At this point, the caller immediately disconnected the call.

At this point, Mihal called the real Mr. Falcone to report the call received a few minutes prior. Falcone stated that within the past five minutes, the insurance agent he met with on January 15, 2009 had called his home and cell phones but that he did not answer. Falcone confirmed that he did not make the most recent call to GAA and reiterated again that he wanted to keep his GAA account intact. Furthermore, Falcone reported that the insurance agent he worked with on January 15, 2009 was **Gregg A. Henderson** (WAOIC agent number 193414).

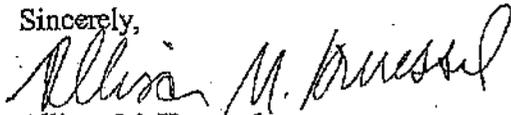
On February 24, 2009 I spoke with Henderson, who denied knowing or conducting business with Falcone and had no recollection of a meeting. Henderson stated that he did not have an appointment book to check for a scheduled meeting with Falcone and stated that he meets with many potential customers daily and that if he does not conduct business with them, he has no recollection.

~~On April 8, 2009, I confirmed with AFA that the agent that submitted Falcone's policy application was in fact Gregg A. Henderson.~~

On April 17, 2009, I again spoke with Henderson. He continued to deny knowing or conducting business with Falcone and suggested that one of his staff might have submitted the application but refused to tell me how many staff members he had. Upon mention of a referral to the Department of Insurance, Henderson immediately became deceptively cooperative and volunteered to search his now-in-existence appointment book. I gave him the approximate date of his meeting with Falcone and he suddenly recalled meeting with him and gave the same specifics of Falcone's alleged history with alcoholism that were given in the impersonating phone call placed to our company on January 26, 2009. Henderson alleged that Falcone would not remember something from one day to the next due to his memory problems stemming from the alleged long term alcoholism. Additionally, distinct similarities were noted between Henderson's voice and that of the impersonating caller.

Please advise is additional information is needed.

Sincerely,



Allison M. Kruessel
Security Specialist I
Investigative Services
American Financial Group
Great American Insurance Companies
525 Vine Street, 14 East
Cincinnati, OH 45202
akruessel@gaic.com
513-333-5545 : fax 513-369-7109 cell 513-807-4056



EXHIBIT 9

GREGG HENDERSON MATTER NO 12-0067 / 1029495

7-20-09 UPDATE MEMORANDUM OF ALLISON KRUESSEL (1 PAGE)

CONFIDENTIAL
INVESTIGATIVE SERVICES REPORT

AMERICAN
FINANCIAL
GROUP, INC.

DATE: July 20, 2009
FROM: Allison Kruessel
Security Specialist I

CASE #: A9-007
REPORT: Status Update
DATE REPORTED: 1/29/2009
OFFICE: Cincinnati

TO: Distribution

SUBJECT: Richard P. Falcone, victim
AGENT: Gregg A. Henderson
LOCATION: Kirkland, WA

EXPOSURE: Unknown

SYNOPSIS

Bill Gaynor, GAFRI Legal Department, reported to Investigative Services that Richard P. Falcone, Great American Advisors client, might have been impersonated in an attempt to facilitate a fraudulent financial transaction on his brokerage account.

CASE CONCLUSION TO DATE

- This is an update to our previous report.
- It was previously reported that a man impersonated GAA client Richard P. Falcone in an attempt to liquidate Falcone's GAA brokerage account, that ~~showed~~ ^{report to} before the attempt Falcone met with GAFRI agent Gregg A. Henderson and might have given Henderson the information necessary to facilitate the fraudulent transaction and that Henderson denied any improper actions involving Falcone's account.

STATUS

- Our findings have been referred to the Washington Department of Insurance and GAFRI management for review. The WA DOI is currently investigating and Henderson still holds current appointments with GALIC, AILIC and LOYAL.

NEXT REPORT

- Our next report will be issued when additional information becomes available.

DISTRIBUTION

Rick Fox
Tom McDaniel

Please address comments or questions to the assigned investigator -- Alli Kruessel, akruessel@gaic.com.
Investigative details are housed in Investigative Services.



EXHIBIT 10

GREGG HENDERSON MATTER NO 12-0067 / 1029495

8-8-09 LETTER BY VIC OVERHOLT TO GREGG HENDERSON (6 PAGES)

MIKE KREIDLER
STATE INSURANCE COMMISSIONER

STATE OF WASHINGTON



OFFICE OF
INSURANCE COMMISSIONER

SEATTLE OFFICE
CENTRAL BUILDING
SUITE 660
810 THIRD AVENUE
SEATTLE, WASHINGTON 98104

August 8, 2009

GREGG A HENDERSON
20900 NE 42ND ST
SAMMAMISH WA 98074

Re: OIC Case File #: 1029495
Consumer: **WA State Insurance Commissioner**
Companies: Aviva Life and Annuity (American Investors Life)
Great American Advisors (Great American Life)
Insured: Richard P. Falcone

Dear Mr. Henderson

I have received a **Request for Investigation** from the above named consumer. (Copy Enclosed)

Please provide my office with a written explanation as to the role you had in these insurance transactions. An insurance transaction includes (but is not limited to) (1) Solicitation, (2) Negotiations preliminary to execution, (3) Execution of an insurance application, and (4) Transactions of matters subsequent to execution of the contract and arising out of it.

In addition, please provide details of your contacts with (1) Great American Advisors, (2) Shawn Mihal and (3) Allison M. Kruessel as outlined in Ms. Kruessel's letter.

Please respond on your company letterhead and include two of your current business cards. Also, please provide my office with copies of all documentation in your files for **Mr. Richard P. Falcone**.

RCW 48.17.475 requires a licensee to respond promptly, in writing, to an inquiry of the Insurance Commissioner. I will expect your response by **September 11, 2009**.

Gregg A. Henderson
August 8, 2009
Page 2

Sincerely

Victor E. Overholt
Investigator
Investigations & Enforcement
Consumer Protection Division
(206) 464-5310
(206) 587-4244 FAX
E-mail: VicO@OIC.WA.GOV

Enclosures

AMERICAN FINANCIAL
GROUP, INC.

INVESTIGATIVE SERVICES
525 VINE STREET, 14TH FLOOR
CINCINNATI, OH 45202

CONFIDENTIAL FACSIMILE TRANSMITTAL SHEET

TO:	Fraud Investigation	FROM:	Allison M. Kruessel
COMPANY:	Washington State Office of the Insurance Commissioner	DATE:	7/7/2009
FAX NUMBER:	360-586-2020	TOTAL NO. OF PAGES INCLUDING COVER:	4
PHONE NUMBER:	360-725-7263	SENDER'S REFERENCE NUMBER:	
RE:	Suspected Fraud Referral	YOUR REFERENCE NUMBER:	

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

Good Afternoon,

I am a fraud investigator for American Financial Group, Inc., based in Cincinnati, OH. Please find attached a suspected agent fraud referral. If you have any questions or need additional documentation, please let me know.

Thank you,



Alli Kruessel
Security Specialist I

Alli Kruessel
American Financial Group
Investigative Services - Security Specialist I
525 Vine Street, 14th Floor
Cincinnati, OH 45202
akruessel@afic.com

513-333-5345

FAX 513-369-7109

CELL 513-807-4056



Investigative Services
525 Vine Street, 14 East
Cincinnati, OH 45202

Allison M. Kruessel
Security Specialist I
(513) 333-5545 fax (513) 369-7109
akruessel@gaic.com

Sent by fax to (360)586-2020

July 6, 2009

Washington State Office of the Insurance Commissioner
P.O. Box 40257
Olympia, WA 98504-0257

Dear Fraud Division,

I am a fraud investigator with the Investigative Services Unit of American Financial Group, Inc. American Financial Group, Inc. is the holding company for Great American Financial Resources, Inc., which includes Great American Advisors.

Please review the following for the elements of a regulatory or criminal offense involving elder fraud that might have been committed by Washington insurance agent Gregg A. Henderson.

SUMMARY

Our investigation determined that an individual believed to be Washington insurance agent Gregg A. Henderson (WAOIC agent license number 193414) might have impersonated Richard P. Falcone, an elderly GAA client, in an attempt to liquidate Falcone's GAA brokerage account to transfer the funds to another carrier.

INVESTIGATION

On January 27, 2009, GAA management contacted Investigative Services and reported that some suspicious activity had occurred on the brokerage account of Richard P. Falcone, GAA client.

It was reported that on January 16, 2009, an individual purporting to be Falcone called GAA and requested liquidation of a GAA brokerage account and provided all of the necessary personal information to do so. Upon GAA's mandatory follow-up with Falcone, it was learned that Falcone did not recall the account liquidation request. At this point, Falcone was provided with, and completed, the appropriate paperwork to cancel the liquidation order and the account was restored.

On January 23, 2009, GAA received account transfer paperwork from AVIVA (American Investors Life Insurance Company, Inc.). The AVIVA forms were signed by Falcone on January 15, 2009 and contained the information necessary to contact GAA and attempt to liquidate the account. Falcone confirmed via e-mail with GAA management that he did not want to transfer his account.

On January 26, 2009, Falcone was interviewed by a representative of our company, Shawn Mihal. Falcone stated that he was 70 years old and has some intermittent memory loss and acknowledged meeting with an insurance sales person on January 15, 2009 but did not recall signing transfer paperwork. He also acknowledged that while he might have signed some forms during this meeting, he did not give consent for anyone to impersonate him and effect trades on his account.

Later on January 26, 2009, Mihal received an additional call from someone reporting to be Mr. Falcone. The caller identified himself as Dick Falcone and said that he wanted to check on the liquidation of an account. The voice of the caller was noticeably different from that of Mr. Falcone's from the earlier conversation that day. Upon a reminder by Mihal that they had spoken earlier that day, the Mr. Falcone on the phone expressed surprise and then reported that he was an alcoholic and often forgets things. The caller requested a reminder about what was previously discussed. At this point, Mihal told the caller he did not believe him to be the real Mr. Falcone and that he believed the caller was an insurance agent that acquired Falcone's personal information and was using it to illegally gain access to the brokerage account held with GAA. At this point, the caller immediately disconnected the call.

At this point, Mihal called the real Mr. Falcone to report the call received a few minutes prior. Falcone stated that within the past five minutes, the insurance agent he met with on January 15, 2009 had called his home and cell phones but that he did not answer. Falcone confirmed that he did not make the most recent call to GAA and reiterated again that he wanted to keep his GAA account intact. Furthermore, Falcone reported that the insurance agent he worked with on January 15, 2009 was **Gregg A. Henderson** (WAOIC agent number 193414).

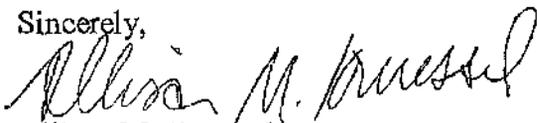
On February 24, 2009 I spoke with Henderson, who denied knowing or conducting business with Falcone and had no recollection of a meeting. Henderson stated that he did not have an appointment book to check for a scheduled meeting with Falcone and stated that he meets with many potential customers daily and that if he does not conduct business with them, he has no recollection.

On April 8, 2009, I confirmed with AVIVA that the agent that submitted Falcone's policy application was in fact Gregg A. Henderson.

On April 17, 2009, I again spoke with Henderson. He continued to deny knowing or conducting business with Falcone and suggested that one of his staff might have submitted the application but refused to tell me how many staff members he had. Upon mention of a referral to the Department of Insurance, Henderson immediately become deceptively cooperative and volunteered to search his now-in-existence appointment book. I gave him the approximate date of his meeting with Falcone and he suddenly recalled meeting with him and gave the same specifics of Falcone's alleged history with alcoholism that were given in the impersonating phone call placed to our company on January 26, 2009. Henderson alleged that Falcone would not remember something from one day to the next due to his memory problems stemming from the alleged long term alcoholism. Additionally, distinct similarities were noted between Henderson's voice and that of the impersonating caller.

Please advise is additional information is needed.

Sincerely,



Allison M. Kruessel

Security Specialist I

Investigative Services

American Financial Group

Great American Insurance Companies

525 Vine Street, 14 East

Cincinnati, OH 452020

akruessel@gaic.com

513-333-5545

fax 513-369-7109

cell 513-807-4056



EXHIBIT 11

GREGG HENDERSON MATTER NO 12-0067 / 1029495

8-17-09 EMAIL FROM ALLISON KRUESSEL TO VIC OVERHOLT WITH AVIVA PAPERWORK (6 PAGES)

Overholt, Vic (OIC)

From: Kruessel, All [akruessel@GAIC.COM]
Sent: Monday, August 17, 2009 9:10 AM
To: Overholt, Vic (OIC)
Subject: OIC Case File #1029495
Attachments: Richard Falcone AVIVA Transfer Paperwork.pdf

Dear Mr. Overholt,

Per your request, I have attached all documentation received from AVIVA during my investigation. Agent Henderson supplied no documentation. If there is anything else I can do, please let me know.

Thank you,

Alli Kruessel
Investigative Services
American Financial Group
Great American Insurance Company
Phone: (513) 333-5545
Fax: (513) 369-7109
akruessel@gaic.com

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DATE: 1-21-09

TO: Great American

Your Contract Number	[REDACTED]
Our Contract Number	[REDACTED]
Annuitant Name:	Richard Falcone
Joint Annuitant Name:	
Owner Name:	MA Same
Joint Owner Name:	MA

The owner has requested to have funds from your company transferred to American Investors Life Insurance Company to be deposited into an annuity contract. We agree to accept the proceeds on a tax-free basis. We acknowledge that the participant will establish the following type of account with American Investors Life and the transferred funds will be credited to this account:

- Nonqualified Annuity (1035 Exchange)
- Nonqualified Annuity (non-1035 Exchange)
- IRA
- SEP IRA
- ROTH IRA
- Other Qualified Plan _____

Enclosed is a Request for Funds/Transfer form. Please process the request as indicated and forward the proceeds to us to be placed into the owner's account. Please make the check payable and send to:

American Investors Life Insurance Company
FBO: Owner Name
555 South Kansas Avenue
PO Box 2039
Topeka KS 66601-2039

Please contact our New Business Department at 888-ANNUITY (888-266-8489) if any additional documentation is needed, or if you have any questions. If this is a 1035 exchange, please provide the cost basis information to us.

Sincerely,

Ginger Dougan
Senior Vice President
AmerUs Annuity Group

Enclosure

38 2900543

Request For Funds



Great American Advisors Inc. Phone Number (Important) 800 216 3354
 Company You Are Transferring From
attn: Trade Desk; 525 Vine St., 7th floor, Cincinnati OH 45202
 Street Address of Company You Are Transferring From City State Zip
Richard P. Falcone
 Name of Insured/Annuitant/Client Social Security Number Name of Owner Owner's Social Security Number
mutual funds IRA \$ 156,000
 Existing Contract/Policy/Account No. Investment Vehicle (i.e., CD, Mutual Fund, Stocks (must be redetermined) etc.) Account Type (i.e., IRA, 409(b) or Name of Fund) Approx. Amount of Transfer Transfer Funds Immediately

COMPLETE SECTION 1 OR SECTION 2 ONLY

1

Request for 1035 Exchange • Non-qualified Insurance or Annuity Contract

I hereby absolutely assign all of my right, title and interest in and to the above referenced contract to American Investors Life Insurance Company, Inc. including, but not limited to, the right to surrender, assign, transfer, or change beneficiary.

Section 1035 of the Internal Revenue Code permits certain nontaxable exchanges of insurance and annuity policies. It is my intention that this transfer qualify as a Section 1035 exchange and that no portion of this exchange be actually or constructively received by me. American Investors Life Insurance Company, Inc. makes no representation concerning my tax treatment for this transaction and the

Lost Policy. I cannot locate the policy.

company has no responsibility nor liability for my tax treatment. I understand the exact amount of the proceeds may vary depending upon the date of transfer, and I agree to execute any additional documents required to complete the transfer. I understand that the exchange is not complete if the company issuing the contract is unwilling or unable to pay the value of the above referenced contract to American Investors Life Insurance Company, Inc. within 60 days of the request for surrender or if said company is not under the control or supervision of a state insurance department. I request that this transfer be accomplished as quickly as possible.

Owner's Signature _____ Date _____ Owner's Signature _____
 By signing below, American Investors Life Insurance company, Inc., owner of the above referenced policy, does hereby request immediate surrender of the above-referenced insurance contract.
 The account to which the funds are being transferred is a non-qualified annuity.

2

Qualified and Non-Qualified Plan Transfer Request, Authorization to Transfer Funds

Please liquidate account in full.
 Please liquidate \$ _____ of my account.
 Please liquidate _____ % of my account.
 Please liquidate certificate(s) of deposit:
 On the maturity date of: _____
 Upon receipt of this request and transfer to the annuity I have established through American Investors Life Insurance Company, Inc. I/We are aware of any penalty that may be imposed from an early withdrawal. (client initials) _____

Lost Policy. I cannot locate the policy.

Special Instructions to Transferring Company: If this is a transfer from a qualified plan, please process the Required Minimum Distribution, if any, for the current year prior to transferring the funds.

Acceptance by American Investors Life Insurance Company, Inc.
 By signing below, American Investors Life Insurance Company, Inc. agrees to accept the transfer described above for the Plan established on behalf of the above named individual. We accept appointment as successor custodian of the above account and request the liquidation and transfer of funds indicated above.

The account to which the funds are being transferred is a non-qualified annuity.
 The account to which the funds are being transferred is an IRA.
 The account to which the funds are being transferred is a Roth IRA.

Owner's Signature Richard P. Falcone Date 1-15-09
 Owner's Signature _____ Date _____
 A Signature Guarantee may be required by transferring company.
 Signature Guarantee By: Name of Bank or Firm _____
 Signature of Officer and Title _____

Make Checks Payable To:
 American Investors Life Insurance Company, Inc.
 FBO: Richard Falcone

Mailing Proceeds Direct To:
 American investors Life Insurance Company, Inc.
 P.O. Box 2039
 Topeka, KS 66601-2039
 800/265-2405 ext. 306 - Fax: 866/709-3921

By Ginger Dugan Date 1-21-09
 Vice President - Annuity New Business
 Title _____
 New Business Dept. Policy No. _____



Great American Advisors, Inc.
 Registered Broker/Dealer Member NASD, SIPC
 P.O. Box 357, Clatskanie, OR 97141-0357

Individual Retirement Account Statement

* 00074547 01 AV 0.324 TR 00287 X115FD07 000000

Account Number: [REDACTED]
 Statement Period: 12/01/2008 - 12/31/2008

IRA FBO RICHARD FALCONE
 PERSHING LLC AS CUSTODIAN
 14209 119TH PLACE NE
 KIRKLAND WA 98034-1104

Valuation at a Glance

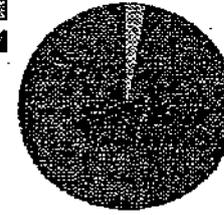
	This Period
Beginning Account Value	\$156,466.78
Cash Deposits	9.82
Dividends/Interest	555.85
Change in Account Value	905.77
Ending Account Value	\$157,938.23
Estimated Annual Income	\$2,236.81



Your Investment Professional:
 ROBERT C. SANTONOCITO
 (425) 830-6612

Asset Allocation

	Value Last Period	Value This Period	Percent Allocation
Fixed Income <i>SDhD</i>	3,686.90	4,092.60	3%
Mutual Funds	152,824.00	153,879.93	97%
Account Total (Pie Chart)	\$156,510.90	\$157,972.53	100%
Cash, Money Funds, and FDIC Deposits	44.12	34.30	
Account Total	\$156,466.78	\$157,938.23	



Asset Allocation percentages are rounded to the nearest whole percentage.
 Pie Chart allocation excludes all asset classes which net to a liability.



IRA RESOURCE CHECKING AGREEMENT

IRA Account Number:

[REDACTED]

Social Security Number or Taxpayer Identification Number:

[REDACTED] - [REDACTED]

Account Information:

Your checks will contain your name and address as they appear on your account registration. If you do not wish to have your address appear on your checks, please check the "No Address" box below.

No Address

If you would like an additional line of information added to your checks (not to exceed 32 characters, including spaces), please include it on the line below.

OTHER OPTIONAL INFORMATION (FOR INSTANCE, TELEPHONE NUMBER)

Preferred Starting Check Number:
(If left blank, your starting check number will be 101.)

1 2 5 0

Signature:

By signing below, you accept the terms of the attached IRA Resource Checking Agreement.

Richard Falco

Date: NOV 14, 2008

For The Introducing Financial Organization:

The undersigned organization guarantees that the signature on this application is that of the account holder or is authorized by the account holder.

West American Advisors
INTRODUCING FINANCIAL ORGANIZATION

Bob Santowcits F.A.
NAME (PLEASE PRINT) TITLE

[Signature] [Date]
SIGNATURE DATE



PH01R0R

I hereby designate SAA as the ACCOUNT BENEFITARY. ACCOUNT NUMBER: [REDACTED]

NAME: Richard Falcaire GENDER: M DATE OF BIRTH: 02/28/1939
 MAILING ADDRESS: 14209 119th Pl, NE CITY: Kirkland STATE: WA ZIP: 98034
 TELEPHONE: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED]

- PARTICIPANT IRA ROLLOVER IRA SPOUSAL IRA
 SIMPLE IRA SEP IRA SEP IRA (made up of your employer's SEP-IRA or SIMPLE IRA)

FOR SEP IRA ONLY, PLEASE PROVIDE YOUR EMPLOYER'S TAX IDENTIFICATION NUMBER:
 Note: If you are 70½ years of age or older this year, you may not transfer or rollover a required minimum distribution amount. If necessary, instruct your present custodian to either: 1) Pay your required minimum distribution to you (or your 2) retain that amount for distribution to you later.

The Participant understands that any idle cash in the IRA will be invested in a money market fund, deposit account, or other investment made available through your financial organization, unless the Participant does otherwise by checking the box below. Any such investment of idle cash is made pursuant to a prospectus or other offering document, which the Participant should obtain from his or her financial organization.

- DO NOT INVEST IN CASH. (The Participant understands that the Participant has no responsibility to invest in or withdraw cash in any IRA.)
 * For more complete information about the money market fund, including charges and expenses, request a prospectus from your financial organization. Read it carefully before you invest.

MARITAL STATUS: SINGLE MARRIED (your spouse must be named in the plan)
 The following shall be my Beneficiary or Beneficiaries of this IRA. If I designate more than one primary or contingent Beneficiary but do not specify the percentage in which such Beneficiary or Beneficiaries is entitled, payment will be made to the surviving Beneficiary or Beneficiaries in equal shares.
 Note: For specific beneficiary provisions, please refer to the applicable sections of the Plan and the Disclosure Statement.

NAME	RELATIONSHIP	DATE OF BIRTH	SOCIAL SECURITY NUMBER	PERCENT
<u>Tracy Marie Stange (E)</u>	<u>Daughter</u>	<u>5-01-1962</u>		<u>50%</u>
<u>Theresa Lynn Aug (E)</u>	<u>Daughter</u>	<u>9-16-1969</u>		<u>50%</u>

CONTINGENT BENEFICIARIES (Contingent beneficiaries will be paid only if all primary beneficiaries do not survive the Participant)

NAME	RELATIONSHIP	DATE OF BIRTH	SOCIAL SECURITY NUMBER	PERCENT

If you are married, reside in a community property or marital property state, and designate someone other than your spouse as your sole, primary Beneficiary, your spouse must sign this form below. In addition, if required in your state, the form must be signed in the presence of a Notary Public. I am the spouse of the above-named account holder. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Due to the importance and consequences of giving up my interest in this IRA, I have been advised to seek tax professional. I hereby give the account holder any interest I have in the funds or property deposited in this IRA and consent to the Beneficiary designation(s) indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Custodian.

SIGNATURE OF SPOUSE: (Required in community or marital property states) _____ DATE: _____

I understand the eligibility requirements for the type of IRA deposits I make and I state that I qualify to make the deposit. I have received a copy of the Fidelity L.I.C. Individual Retirement Custodial Account Plan and Disclosure Statement. I understand that the terms and conditions which apply to this Individual Retirement Account are contained in the Fidelity L.I.C. Individual Retirement Custodial Account Plan and Disclosure Statement. I agree to be bound by those terms and conditions. If I elect to make a rollover contribution to this account, I hereby certify that I understand the rollover rules and conditions that apply to this IRA and I have met the requirements for making a rollover. Due to the important tax consequences of rolling over funds or property I have been advised to consult with a tax professional. All information provided by me is true and correct and may be relied upon by the Custodian. I assume full responsibility for establishing this IRA and for rollover transactions and will not hold the Custodian liable for any adverse consequences that may result. I hereby irrevocably designate the rollover of funds or other property as rollover contributions. I HEREBY ADOPT THE FIDELITY L.I.C. INDIVIDUAL RETIREMENT CUSTODIAL PLAN. I AGREE THAT THIS AGREEMENT CONTAINS AN IRREVOCABLE ARBITRATION CLAUSE WHICH IS LOCATED AT ARTICLE IX ON PAGE 7 OF THIS AGREEMENT.

PARTICIPANT OR GRANTEE SIGNATURE: Richard Falcaire DATE: Nov. 4th 2008

APPROVALS BY THE FINANCIAL ORGANIZATION (These forms to your financial organization (as approved))
 Financial Professional Signature (if applicable) _____ Date: Nov 4 2008 Operations Manager Signature _____ Date: _____



EXHIBIT 12

GREGG HENDERSON MATTER NO 12-0067 / 1029495

ASSORTED AVIVA RECORDS (10 PAGES)

CONFIDENTIAL

AIL_AGENT_HENDERSON_000008

306-1900549

Application for Indexed Deferred Annuity



1 Annuitant

Richard P. Falcone
 First Name (as to appear on contract) M.I. Last Name
 2-28-39 [REDACTED] Male Female
 Date of Birth Social Security Number
 14209 119 PL NE
 Address
 Kirkland WA 98034 425 820-4609
 City State Zip Code Phone Number

2 Joint Annuitant If applicable

 First Name (as to appear on contract) M.I. Last Name
 _____ Male Female
 Date of Birth Social Security Number

 Address

 City State Zip Code Phone Number

3 Owner If other than Annuitant

 First Name of Individual or Entity (as to appear on contract) M.I. Last Name

 Address

 City State Zip Code Phone Number
 _____ Male Female
 SSN or Tax ID Number Date of Birth Relationship to Annuitant(s)
 (Note: If the Owner is not a natural person, please provide supporting documentation)

4 Joint Owner Not applicable to qualified contracts

 First Name (as to appear on contract) M.I. Last Name
 _____ Male Female
 Date of Birth SSN or Tax ID Number Relationship to Annuitant(s)

 Address

 City State Zip Code Phone Number

5 Contingent Owner If Owner and Annuitant are different

 First Name (as to appear on contract) M.I. Last Name
 _____ Male Female
 Date of Birth SSN or Tax ID Number Relationship to Annuitant(s)

 Address

 City State Zip Code Phone Number

6 Beneficiaries Unless otherwise specified, multiple surviving beneficiaries will share equally. If a beneficiary is not a natural person, include name and date. All beneficiaries must be living at the time of application.

Primary Beneficiary 1	Tracy M. Sharpe	daughter	50	Percent* Percentages for Primary Beneficiaries must total 100 percent
Primary Beneficiary 2	Theresa L. Ong	daughter	50	
Primary Beneficiary 3				
Contingent Beneficiary 1				Percent* Percentages for Contingent Beneficiaries must total 100 percent
Contingent Beneficiary 2				

7 Product

Contract Form Income Select 10 Rider(s) _____

CONFIDENTIAL

AIL_AGENT HENDERSON_000007

B Funding Source Premium Submitted with Application Anticipated Premium from transfer
 \$ _____ \$ 156,000

B Tax Qualification Select ALL that apply

<input type="checkbox"/> Non-Qualified	<input checked="" type="checkbox"/> IRA	Select ALL that apply.
<input type="checkbox"/> 1035 Exchange	<input type="checkbox"/> ROTH IRA	<input type="checkbox"/> Contribution for Tax Year _____
<input type="checkbox"/> Internal Conversion Contract Number _____	<input type="checkbox"/> SEP IRA	<input checked="" type="checkbox"/> Rollover (Within 60 days)
	<input type="checkbox"/> KEOGH/HR-10	<input type="checkbox"/> Direct Transfer from IRA/SEP
	<input type="checkbox"/> TSA-403(b) Trans.	<input type="checkbox"/> Direct Transfer from ROTH IRA
	<input type="checkbox"/> POPST*	<input type="checkbox"/> ROTH Conversion
		<input type="checkbox"/> Direct Transfer from 401(k), HR10, 403(b), Pension Plan

*Owner must be POPST

10 Replacement Do you have an existing life insurance policy or an existing annuity contract? Yes No
 Will this annuity replace or change an existing life insurance policy or annuity contract? Yes No

11 Special Instructions
The client wants to hold \$5,000 out of the transfer.
Please send him a check for the \$5,000 and deposit
the rest into the annuity.

12 Agreements and Signatures
 The Owner agrees to the following:
 1. The answers in this application are true to the best of my knowledge and belief.
 2. The effective date of the Contract will be the Contract Date set by the Company.
 3. No agent or person other than the President or Secretary of the Company has the authority to change or modify the Contract or waive any of its provisions.
 It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Payment must be made payable to American Investors Life Insurance Company.

Signed at Kirkland WA on 1-15-09
(city) (state) (date)
Richard P. Folz
 Signature of Annuitant Signature of Joint Annuitant (if applicable)

Signature of Owner (if other than Annuitant) Signature of Joint Owner (if applicable)

Agent Use Only. Does the applicant have an existing life insurance policy or an existing annuity contract? Yes No
 (If yes, and if required by state regulation, replacement forms must accompany this application.)
 Will this annuity replace or change an existing life insurance policy or annuity contract? Yes No

Gregg Henderson Gregg Henderson
 Signature of Agent Agent's Name (print please)
52738-19 193414 206 354 1324
 Agent Number Agent Insurance License Number Agent Phone Number

American Investors Life Insurance Company • PO Box 2036 • Topeka, KS 66601-2036 • (800) 266-2406

CONFIDENTIAL

AIL_AGENT HENDERSON_000008

The S&P 500[®] Index, Nasdaq-100 Index[®], Dow Jones Index, Dow Jones Euro STOXX 50[®] and Hang Seng Index do not include dividends paid on the underlying stocks, and therefore do not reflect the total return of the underlying stocks. Past performance is no guarantee of future performance or value of the product.

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388-2980551

KEY TERMS OF YOUR ANNUITY CONTRACT

- Interest Rate:** The interest rate for your annuity is described in your annuity Contract and summarized above under the heading "How much interest will be credited to my Contract?" Please note that the interest rate your annuity will earn in the second and later years may be lower than the interest rate in the first year.
- Minimum Annual Interest Rate:** The minimum annual interest rate your annuity will earn depends on, among other things, the interest crediting Strategies you choose. These Strategies are described in your annuity Contract and summarized above under the heading "How much interest will be credited to my Contract?" For the Fixed Strategy, the interest rate can change each year and is guaranteed never to be less than 2%. For the Indexed Strategies, the interest rate will depend on the Indexed Strategies you choose, but will never be less than 0%.
- Withdrawal Charge:** Your annuity is subject to a Withdrawal or "surrender" Charge during the first ten (10) Contract Years. A Withdrawal Charge is the cost you incur on any amount withdrawn or surrendered that exceeds the Free Withdrawal amount available under your annuity Contract. The Withdrawal Charge is described in your annuity Contract and summarized above under the heading "What If I decide to surrender (cancel) my Contract?" The Withdrawal Charge is applied at the time of the Withdrawal or surrender and is calculated by multiplying the applicable percentage shown in the table below by the amount withdrawn in excess of the Free Withdrawal amount.

Contract Year	1	2	3	4	5	6	7	8	9	10	11+
Withdrawal Charge %	10%	9%	8%	7%	6%	5%	4%	3%	2%	1%	0%

Initial Strategy Allocation Percentages

FIXED	_____ %	1-YR UNCAPPED AVERAGE	_____ %
1-YR POINT-TO-POINT	20 %	1-YR MONTHLY CAP	_____ %
1-YR PT-TO-PT PARTICIPATION	_____ %	1-YR UNCAPPED MULTIPLE	80 %
1-YR PT-TO-PT GUAR CAP (DOW JONES EURO STOXX 50®)	_____ %	1-YR 10-PT GUAR CAP (HANG SENG INDEX)	_____ %

NOTE: The sum of the percentages allocated to each Strategy must total 100%.

- Applicant Acknowledgement**
By signing below, I acknowledge that I have read, or have been read, this disclosure form and understand its contents. I have also received and reviewed the information contained in the Income Select 10 brochure. I further understand that I have applied for a Fixed, Indexed Deferred Annuity. In doing so, I have discussed my financial status, tax status, current insurance products and investments (including my investments objectives) with my agent and believe this annuity will assist me in meeting my current financial needs and objectives.

Owner(s)/Applicant(s) Name (Please print) Richard P. Falcone

Owner(s)/Applicant(s) Signature(s) Richard P. Falcone

Social Security # Phone # 425-820-4609 Date 1-15-09

- Agent Confirmation**
By signing below, I acknowledge that I have reviewed this disclosure form and the Income Select 10 brochure with the applicant. I certify that a copy of this disclosure form, the Income Select 10 brochure, the Buyer's Guide, as well as any advertisement used in connection with the sale of this annuity, has been provided to the applicant. I have not made any statements that differ from what is stated in this disclosure form or the brochure and no promises or assurances have been made about the future value of any non-guaranteed elements of the annuity.

Agent Name (Please print) Gregg Henderson Agent Number 52738

Agent Signature Gregg Henderson Date 1-15-09

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303-2990553

AMERICAN INVESTORS LIFE INSURANCE COMPANY, INC.

IRA DISCLOSURE STATEMENT

Acknowledgement of Receipt

I hereby certify that the agent has furnished to me, for my information, an IRA Disclosure Statement with an attached Financial Disclosure. I understand that I am responsible for determining my eligibility for all types of contributions and the tax consequences. I acknowledge that American Investors Life and its agents cannot provide me with legal advice and I agree to consult with my own tax professional if I need advice.

Richard P. Falcone
Owner's Signature

1-15-09
Date

The original signed copy of this Acknowledgement of Receipt must accompany the application when sent to the Home Office.

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AIL AGENT HENDERSON 000011

Aviva Life and Annuity Company American Investors Life Insurance Company, Inc
 Aviva Life and Annuity Company of New York



Customer Identification and Suitability Confirmation Worksheet **AVIVA**

Thank you for your interest in a fixed annuity product. Completion of this worksheet is an essential part of the application process. It not only helps your agent assess your insurance needs and financial objectives, but also aids in ensuring compliance with the USA Patriot Act.

NOTE: If applying as a joint owner and your relationship to the other joint owner is not spouse, separate worksheets must be completed by each joint owner.

Non-Natural Owners: For a non-natural owner, the information on the front of this form should be relevant to the annuity, on the backside (page two) the Identification Verification information should be provided by the person(s) authorized to act on behalf of the entity.

308-2950519

Owner Information

1 Name Richard K. Falcone
2 Occupation retired
3 U.S. Citizen Yes No
4 Place of Birth Seattle, WA
Specify City and State (Country if other than United States)
5 Approximate Annual Income \$ 18,000
6 Approximate Net Worth \$ 250,000
*Net Worth = Total Assets (not including home and automobile) Less Total Debts

Joint Owner Information

3 Name _____
4 Occupation _____
5 U.S. Citizen Yes No
6 Place of Birth _____
Specify City and State (Country if other than United States)

7 Source of Income Current Wages Pension Plan Social Security Investment Income
 Required Minimum Distribution (RMD) or 72(t)(g) distributions Other _____

8 Federal Income Tax Bracket 0% 10% 15% 25% 28% 33% 35% Other _____

9 What is your financial objective in purchasing this product? Check all that apply
 Income Now Flexibility Tax Deferral Provides Guarantees Potential Growth Followed by Income
 Pass Assets on to Beneficiaries Lifetime Income Payout Other _____

10 Do you have sufficient liquid assets available for monthly living expenses and emergencies other than the money you plan to use to purchase this annuity?
 Yes, please list amount of liquid assets \$ 30,000 (Examples: checking, savings or money market accounts, term loan CD's, bonds, etc.)
 No

11 What is the source of premium for this annuity? Check all that apply
 Annuity Life Insurance Certificates of Deposit Other Investments Other _____

11a Yes No Are there any settlement fees, surrender charges or penalties of any kind associated with any source(s) of the annuity's premium checked above?

<u>If 11a is Yes:</u> List the percentage of any settlement fees, surrender charges or penalties of any kind associated with any source(s) of the annuity's premium. List total percentage for each premium source, not less any applicable bonus percentage received on the new annuity. <u>If multiple sources of premium list each percentage separately.</u>	Source of Premium (Type or Company Name)	Penalty Percentage

12 Do you now own, or have you previously owned, any of the following financial products? (check all that apply)
 Certificates of Deposit Fixed Annuity Variable Annuity Stock/Bond/Mutual Funds Life Insurance None

12a Yes No Were your current investments and insurance products discussed with your agent prior to your decision to purchase this annuity?

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AIL_AGENT HENDERSON_000012

17. With the exception of any surrender charge free withdrawals, required minimum distribution, etc., do you expect to take any money out of this product before the end of the withdrawal charge period? Yes No

If Yes, please explain:

(Do not include any surrender charge free withdrawals provided by contract (i.e. RMD or any surrender charge free withdrawal percentage)

18. Yes No Did the agent explain that if you take money out of this product in excess of the surrender charge free withdrawal amount provided in the contract during the withdrawal charge period you will incur a penalty?

19. Yes No Is the purchase of this annuity in any way related to the establishment of a trust or based in any way on information provided during the establishment of a trust?

20. To the extent you are willing, please provide any other information you considered material in your decision to purchase this annuity

Customer Identification Verification Type of Government issued Photo ID: Choose either A, B, C or D.

Owner Verification

A Drivers License (DL)	WA	[REDACTED]	2-28-13
	State of Issue	DL Number	Expiration Date
B Passport			
	Country of Issuance	Number	Expiration Date
C Other			
	State/Country of Issuance	Number	Expiration Date
D <input type="checkbox"/> An unexpired Government issued photo ID is not available			

Joint Owner Verification

A Drivers License (DL)			
	State of Issue	DL Number	Expiration Date
B Passport			
	Country of Issuance	Number	Expiration Date
C Other			
	State/Country of Issuance	Number	Expiration Date
D <input type="checkbox"/> An unexpired Government issued photo ID is not available			

Owner's Confirmation

Yes No Was your decision to purchase this annuity based on your agent's recommendation?

By signing below, I acknowledge that I reviewed the Customer Identification Notice (form number 10200) and agree with the terms of the notice. In addition, I acknowledge the information I provided above, regarding my financial status, tax status, investment objectives, identification information and any other information requested by my agent is complete and accurate to the best of my knowledge. I further acknowledge that neither the Company nor its representatives offer legal or tax advice and that I have been advised to consult my own personal attorney or tax advisor on any tax matters. I acknowledge that the fixed annuity I am applying for is a long term contract with substantial penalties for early withdrawal. Additionally, I am aware that any withdrawals taken from the annuity may result in a taxable event. I believe the annuity I am applying for is suitable according to my insurance needs and/or financial objectives.

Owner's Signature: [Signature] Date: 1-15-09

Joint Owner's Signature

Date

Agent's Confirmation

Yes No Was the owner's decision to purchase this annuity based on your recommendation?

Yes No Did you consider the risk associated with the amount of the annuity premium and the coverage limits provided by the applicable state life and health guaranty association?

By signing below, I acknowledge that I have made a reasonable effort to obtain information from the Owner concerning the Owner(s)' financial status, tax status, investment objectives and other information considered reasonable. It is my belief that based on the information the Owner provided and based on all the circumstances known to me at the time the recommendation was made, the annuity being applied for, based on my recommendation is suitable for the Owner(s)' insurance needs and/or financial objectives. In addition, I have verified the identity of the owner(s) and believe the information the owner(s) provided to me regarding his or her identity is true and accurate.

Agent's Signature: [Signature] Date: 1-15-09

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AIL_AGENT HENDERSON_000014

Request For Funds



Great American Advisors Inc. 800 216 3354

Company You Are Transferring From Phone Number (Important)

attn: Trade Desk; 525 Third St., 7th floor, Cincinnati OH 45202

Street Address of Company You Are Transferring From State Zip

Richard P. Falcone

Name of Insured/Annuity/Client Owner's Social Security Number

mutual funds IRA \$156,000

Investment Vehicle (i.e. CD, Mutual Fund, Stock (must be referenced)) Approx. Amount of Transfer Transfer Funds Immediately

Account Type (i.e. IRA, 402(k) or Name of Fund)

COMPLETE SECTION 1 OR SECTION 2 ONLY

Request for 1035 Exchange - Non-qualified Insurance or Annuity Contract

I hereby absolutely assign all of my right, title and interest in and to the above referenced contract to American Investors Life Insurance Company, Inc. including, but not limited to, the right to surrender, assign, transfer, or change beneficiary.

company has no responsibility nor liability for my tax treatment. I understand the exact amount of the proceeds may vary depending upon the date of transfer, and I agree to execute any additional documents required to complete the transfer. I understand that the exchange is not complete if the company issuing the contract is unable or unwilling to pay the value of the above referenced contract to American Investors Life Insurance Company, Inc. within six months of the request for surrender or if said company is placed under the control or supervision of a state insurance department. I request that this transfer be accomplished as quickly as possible.

Section 1035 of the Internal Revenue Code permits certain nontaxable exchanges of insurance and annuity policies. It is my intention that this transfer qualify as a Section 1035 exchange and that no portion of this exchange be actually or constructively received by me. American Investors Life Insurance Company, Inc. makes no representation concerning my tax treatment for this transaction and the

Lost Policy I cannot locate the policy

Owner's Signature _____ Date _____ Owner's Signature _____ Date _____

By signing below, American Investors Life Insurance Company, Inc., owner of the above referenced policy, does hereby request immediate surrender of the above referenced insurance contract.

The account to which the funds are being transferred is a non-qualified annuity.

Qualified and Non-Qualified Plan Transfer Request - Authorization to Transfer Funds

- Please liquidate account in full
- Please liquidate \$ _____ of my account
- Please liquidate _____ % of my account
- Please liquidate certificate(s) of deposit
 - On the maturity date of _____
 - Upon receipt of this request and transfer to the annuity I have established through American Investors Life Insurance Company, Inc. (We are aware of any penalty that may be imposed from an early withdrawal (client initials))

Richard P. Falcone
Owner's Signature _____ Date 9-15-09

Owner's Signature _____ Date _____

A Signature Guarantee may be required by transferring company.

Signature Guarantee By Name of Bank or Firm _____

Signature of Officer and Title _____

Lost Policy I cannot locate the policy

Special Instructions to Transferring Company: If this is a transfer from a qualified plan, please process the Required Minimum Distribution, if any, for the current year prior to transferring the funds.

Acceptance by American Investors Life Insurance Company, Inc.

By signing below, American Investors Life Insurance Company, Inc. agrees to accept the transfer described above for the Plan established on behalf of the above named individual. We accept appointment as successor custodian of the above account and request the liquidation and transfer of funds indicated above.

- The account to which the funds are being transferred is a non-qualified annuity.
- The account to which the funds are being transferred is an IRA
- The account to which the funds are being transferred is a Roth IRA

Make Checks Payable To:
American Investors Life Insurance Company, Inc.
PBO: _____

Mailing Proceeds Direct To:
American Investors Life Insurance Company, Inc.
PO Box 2039
Topeka, KS 66601-2039
800/255-2405 ext 306 - Fax 866/709-3921
00204 RF (006)

Dan Dungan
By _____ Date _____
Vice President - Annuity New Business
Title _____
New Business Dept Policy No _____

306-2900543

AVIVA 9/10/2008 3:45:02 PM PAGE 16/018 FAX SERVICE

AIL_AGENT HENDERSON_00001E



Great American Advisors, Inc.
Registered Broker/Dealer, Member SIPC, FINRA
211 East 25th Street, Columbus, OH 43215-1237

Individual Retirement Account Statement

* 00074547 01 AV 0.324 TR 08367 X1166007 000008

Account Number: [REDACTED]
Statement Period: 12/01/2008 - 12/31/2008

IRA FBO RICHARD FALCONE
PERSHING LLC AS CUSTODIAN
14209 119TH PLACE NE
KIRKLAND WA 98034-1104

Valuation at a Glance

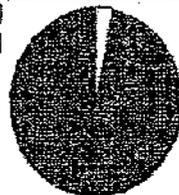
	This Period
Beginning Account Value	\$156,466.79
Cash Deposits	9.82
Dividends/Interest	555.86
Change in Account Value	905.77
Ending Account Value	\$157,938.23
Estimated Annual Income	\$1,236.81



Your Investment Professional:
ROBERT C. SANTONOCITO
(425) 830-5612

Asset Allocation

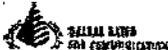
	Value Last Period	Value This Period	Percent Allocation
Fixed Income <i>BDD</i>	3,686.90	4,092.60	3%
Mutual Funds	152,874.00	153,879.93	97%
Account Total (Pie Chart)	\$156,560.90	\$157,972.53	100%
Cash, Money Funds, and FDIC Deposits	44.12	34.30	
Account Total	\$156,605.02	\$158,006.83	



Asset Allocation percentages are rounded to the nearest whole percentage.
Pie Chart allocation excludes all asset classes which net to a liability.

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300-2900544



6691710011592

842-R01L

Clearing Through Pershing LLC, a subsidiary of The Bank of New York Mellon Corporation
Member FINRA NYSE SIPC

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AIL_AGENT HENDERSON_000016

309-2960545

WASHINGTON DRIVER LICENSE

LIC # [REDACTED] EXP 02-28-2013

FALCONER RICHARD P
 14209 118TH PL. NE
 KIRKLAND WA 98034-1184

SEX	HT	WT	HAIR	EYES
M	5-02	154	BRN	BRN

ISSUE DATE: 02-13-2009
 EXP: 02-28-2013

Richard P. Falconer

