



Important Information Regarding Your Privacy

Privacy Commitment to Our Members

The Polish Women's Alliance of America values your business and we appreciate the trust you've placed in us. That's why we're serious about keeping your personal information private. Protecting the privacy of your personal, financial, and medical information has always been and will continue to be a matter of top priority for us.

When you applied for life insurance or an annuity, you provided us with employment and medical information and authorized us to obtain further information concerning your health history, mode of living, and other personal characteristics. Based on this authorization, only the minimum amount of information necessary to underwrite your application has been collected.

We do not, and we will not, provide any personal information about you to any third party, except as permitted or required by law, or as you may authorize. There are no affiliated financial institutions or third party non-affiliates, which have access to your non-public information, except pursuant to your express written authorization. We never sell lists of the names and addresses of our members to any vendors of goods or services.

Employee access to your personal, non-public, information is authorized for business purposes only. It's based on an employee's need to know such information to provide services to you, or to conduct PWAA business. Employees who have access to customer information are required to protect it and keep it confidential.

We are, and will continue to be, vigilant in the safeguarding of your personal, financial, and medical information. It is our sincere desire to maintain complete, accurate, and up-to-date records. You may contact PWA at our toll-free number 1-888-522-1898 to access, as provided by law, information included in your file or you can write Polish Women's Alliance at the address below. We will promptly correct any error in our information. To protect your privacy, you will need to identify yourself by providing us with your name, date of birth, and social security number.

Our policy of protecting the security of non-public information also extends to former members who no longer have any coverage with us.

Form GLBAD-01/10

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