

 <p>First Investors Life  <b>Attn: Inforce Services Dept.</b>  RARITAN PLAZA I  P.O. BOX 7836  <b>EDISON, NJ 08818-7836</b>  <b>1.800.832.7783</b></p>	<b>FIL VARIABLE  ANNUIITY</b>	DATE RECEIVED AT FIL:
	<b>SUBACCOUNT REALLOCATION</b>	
	<b>REQUEST FORM</b>	

Owner Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Please change the allocation among subaccounts of the above numbered First Investors Life Variable Annuity Contract to be as follows: (Up to 5 subaccounts may be selected; each percent must be a whole number not less than 10%; total percent allocated must equal 100%.)

Subaccount	% Allocated
Blue Chip	_____
Cash Management	_____
Discovery	_____
Government	_____
Growth & Income	_____
High Yield	_____
International	_____
Investment Grade	_____
Select Growth	_____
Value Fund	_____
Target Maturity 2010	_____
Target Maturity 2015	_____

Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_