PACIFIC LIFE INSURANCE COMPANY

Consumer Markets Division – Life Insurance P.O. Box 2030 • Omaha, NE 68103-2030 (800) 347-7787 • Fax (866) 398-0467 www.PacificLife.com



IN FORCE VARIABLE LIFE INVESTMENT OPTION SERVICES

Primary Insured's Name: First MI Last	Policy Number				
Policyowner's Name	Telephone Numb	umber (Include area code)			
Request		Complete Sections			
One-Time Reallocation		1., 6. & 8.			
☐ Portfolio Rebalancing		2., 6. & 8.			
□ Dollar Cost Averaging (DCA)		3., 6. & 8.			
Fixed Transfer Services (FTS) (Scheduled Indexed Transfer or Fixed Option Interest Sweep)		4., 6. & 8.			
☐ Indexed Segment Maturity Reallocation		5. & 8.			
☐ Fund to Fund Transfers		7. & 8.			
☐ Future Payment Allocation		7. & 8.			
IMPORTANT: NOT ALL VARIABLE INVESTMENT OPTIONS ARE AVAILABLE ON ALL PRODUCTS. TO A EFFECTIVE DATE OF YOUR TRANSACTION, ENSURE THE INVESTMENT OPTION SELECTED ON THI POLICY. TO CHECK IF THE DESIRED INVESTMENT OPTION(S) IS AVAILABLE, REFER TO YOUR PROPERFORMANCE REPORT ON www.pacificlife.com FOR A DETAILED LIST OF INVESTMENT OPTIONS.	S FORM IS AVAIL DSPECTUS OR T	_ABLE FOR YOUR HE MONTHLY			
1. One-Time Reallocation One-Time Reallocation includes a current transfer of your existing Variable Investment Options. Complete th Section 6. Your future payment allocations will be updated to match the selected allocations unless of Any active scheduled rebalancing will be cancelled if all or any portion of the policy's accumulated value is tricurrently selected for your Portfolio Rebalancing program.	therwise indicate	ed in Section 7.			
2. Portfolio Rebalancing					
Rebalancing automatically rebalances the Accumulated Value in the Variable Investment Options to the allocations and the Variable Investment Options to the allocations are the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options to the Accumulated Value in the Variable Investment Options of the Accumulated Value in the Variable Investment Options of the Accumulated Value in the Variable Investment Options of the Accumulated Value Inves	cation percentages	s selected in Section 6.			
The date of the scheduled event is based on your policy date.					
Portfolio rebalancing must include two or more funds. If you would like to reallocate your policy to o One-Time Reallocation.	ne fund, please r	efer to Section 1. –			
Choosing Enroll or Change includes a current transfer of your existing variable investment options. Your fut updated to match the selected allocations unless otherwise indicated in Section 7.	ure payment allo	cations will be			
Action Desired: (select one) ☐ Enroll ☐ Change ☐ Cancel Frequency of Transfers: (select one) ☐ Quarterly ☐ Semi-Annually ☐ Annually					
Allocation Selection: Complete the Rebalance percentage column in Section 6.	amaany				
Rebalancing will continue until 1) a written request from the policyowner(s) to discontinue is received, or 2) if or any portion of the policy's accumulated value out of the investment options selected at the time of enrollm		olicyowner moves all			
3. Dollar Cost Averaging (DCA) DCA is the movement of values from one Variable Investment Option into one or more Variable Investment Option Into Opt		etermined schedule.			
Action Desired:					
Transfer From: (Use Investment Option	on name from list i	in Section 6.)			
Transfer Options: (select one) Deplete the investment option in number of transfers.					
Transfer \$ until end date (mm/dd/yyyy). If no end date is provided in the control of	ded, transfers will	continue indefinitely as			
long as there is value in the source fund and will resume if value in the source fund is replenished.		□ A !!			
Frequency of Transfers: (select one):	nnually	☐ Annually			

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4. Fixed Transfer Service (FTS) Onleand replaced with this current request. The Fixed Transfer Services allows scheduled transfer Services allows scheduled transfer Services allows scheduled transfer Services allows scheduled transfer Scheduled Indexed Transfer	nsfers from the Fixed A	ccount to the selected investment o	otions. See prospectus for details.
available Segment Start Date. Choose only o	one option below. mount n each Transfer Date :	Option 2 - 1 Year Dep	
Transfer from: Fixed Account 1 Start Date: Transfer dates will occur based of		: (Not all Indexed Options are ava _% 1 Year Indexed Account (Also k _% 1 Year Indexed Account 4 (Also _% 1 Year Indexed Account 6 (Also _% 2 Year Indexed Account	nown as 1-Year Indexed) known as 1-Year No Cap) known as 1-Year High Cap)
Frequency of Transfers: (select one):	☐ Monthly	Quarterly	ansior date.
the variable investment options. Transfer from Fixed Account 1 Transfer to: Complete the ISW column in se	-, -,	umulation of interest earnings from th	ne Fixed Account 1 to be transferred to
Start Date: Transfer dates will occur based of End Date: (mm/dd/yyyy If no end date is provided, transfer will contin replenished. Frequency of Transfers: (select one):	v) ue indefinitely as long a	·	will resume if value in the account is
f applicable, complete the New Business Variable	Life Optional Services	form to enroll in or make changes to	the First Year Transfer Service.
5. Indexed Segment Maturity Reall segment(s) or Fixed Option.	ocation Complete th	nis section to reallocate the Indexed	Segment Maturity Value to a new

1-Year Indexed Option	1-Year No Cap Indexed Option
Transfer% to 1-Year Indexed	Transfer% to 1-Year Indexed
Transfer% to 1-Year No Cap	Transfer% to 1-Year No Cap
Transfer% to 1-Year High Cap	Transfer% to 1-Year High Cap
Transfer% to 2-Year Indexed	Transfer% to 2-Year Indexed
Transfer% to Fixed Account 1	Transfer% to Fixed Account 1
Total:% MUST EQUAL 100%	Total:% MUST EQUAL 100%

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5. Indexed Segment Maturity Reallocation (Continued) Complete this section to reallocate the Indexed Segment Maturity Value to a new segment(s) or Fixed Option.

1-Year High	Cap Indexed Option	2-Year Indexed Option		
Transfer	% to 1-Year Indexed	Transfer	_% to 1-Year Indexed	
Transfer	% to 1-Year High Par	Transfer	_% to 1-Year High Par	
Transfer	% to 1-Year No Cap	Transfer	_% to 1-Year No Cap	
Transfer	% to 1-Year High Cap	Transfer	_% to 1-Year High Cap	
Transfer	% to Fixed Account 1	Transfer	_% to Fixed Account 1	
Total:	% MUST EQUAL 100%	Total:	_% MUST EQUAL 100%	

6. Allocations

Percentage Totals must equal 100% for each column.

Investment Options	Internal Use Code	(A) One-Time %	(B) Rebalance %	(C) DCA %	(D) ISW %
Domestic Equity					
Bain Capital Equity Opportunites	C8				
DFA VA US Large Value	VN				
DFA VA US Targeted Value	VM				
M Capital Appreciation (Frontier)	A2				
M Large Cap Growth (DSM Capital)	C2				
M Large Cap Value (Brandywine)	O2				
MFS VIT New Discovery Ser	MW				
PSF Equity Index (BlackRock)	EY				
PSF Hedged Equity (JPMorgan)	OY				
PSF Large-Cap Growth (FIAM)	ВО				
PSF Small-Cap Index (BlackRock)	SB				
T. Rowe Price Blue Chip Growth	K1				
Vanguard VIF Mid Cap Index	VC				
Vanguard VIF Total Stock Market Index	VE				
Asset Allocation/Balanced					
PSF ESG Diversified (PLFA)	OZ				
International Equity					
DFA VA Intl Small	VP				
DFA VA Intl Value	VO				
Fidelity VIP Intl Index	N4				
M Intl Equity (DFA)	S2				
PSF Emerging Markets (GSAM)	PE				
PSF Intl Large-Cap (MFS)	X1				

See pages 5 through 6 for Fund to Fund Transfer and to designate new Future Payment Allocations

Primary Insured's Name: First	MI	Last	Policy Number

6. Allocations (Continued)

Percentage Totals must equal 100% for each column.

Investment Options	Internal Use Code	(A) One-Time %	(B) Rebalance %	(C) DCA %	(D) ISW %
Sector/Specialty					
VanEck VIP Glbl Resources	2W				
Vanguard VIF Real Estate Index	VF				
Cash Equivalents					
Fidelity VIP Govt Money Market	MM				
Fixed Income					
PSF Diversified Bond (Loomis Sayles)	U1				
PSF Floating Rate Income (Aristotle Pacific)	RH				
PSF Total Return (PIMCO)	M1				
Vanguard VIF Total Bond Market Index	VB				
Indexed Account Options					
Pacific Life-1 Year Indexed Account	V1, VX		N/A	N/A	N/A
Pacific Life-1 Year Indexed Account 4 (1-Year No Cap)	V6, TX		N/A	N/A	N/A
Pacific Life-1 Year Indexed Account 6 (1-Year High Cap)	UX		N/A	N/A	N/A
Pacific Life-2 Year Indexed Account	II		N/A	N/A	N/A
Fixed Account Options					
Pacific Life-Fixed Account 1			N/A	N/A	N/A
Other Approved Investment Options (write in)					

See pages 5 through 6 for Fund to Fund Transfer and to designate new Future Payment Allocations.

Primary Insured's Name: First	MI	Last	Policy Number

7. Fund to Fund Transfer / Future Payment Allocations

Percentage Totals in the Transfer TO and Future Payment Allocations columns must equal 100%.

☐ Do not change my future payment allocations.

Transfer FROM Enter \$ or %	Investment options	Internal Use Code	Transfer TO Enter \$ or %	Future Payment Allocation %
	Domestic Equity			
	Bain Capital Equity Opportunities	C8		
	DFA VA US Large Value	VN		
	DFA VA US Targeted Value	VM		
	M Capital Appreciation (Frontier)	A2		
	M Large Cap Growth (DSM Capital)	C2		
	M Large Cap Value (Brandywine)	O2		
	MFS VIT New Discovery Ser	MW		
	PSF Equity Index (BlackRock)	EY		
	PSF Hedged Equity (JPMorgan)	OY		
	PSF Large-Cap Growth (FIAM)	ВО		
	PSF Small-Cap Index (BlackRock)	SB		
	T. Rowe Price Blue Chip Growth	K1		
	Vanguard VIF Mid Cap Index	VC		
	Vanguard VIF Total Stock Market Index	VE		
	Asset Allocation/Balanced			
	PSF ESG Diversified (PLFA)	OZ		
	International Equity			
	DFA VA Intl Small	VP		
	DFA VA Intl Value	VO		
	Fidelity VIP Intl Index	N4		
	M Intl Equity (DFA)	S2		
	PSF Emerging Markets (GSAM)	PE		
	PSF Intl Large-Cap (MFS)	X1		
	Sector/Specialty			
	VanEck VIP Glbl Resources	2W		
	Vanguard VIF Real Estate Index	VF		
	Cash Equivalents			
	Fidelity VIP Govt Money Market	MM		
	Fixed Income			
	PSF Diversified Bond (Loomis Sayles)	U1		
	PSF Floating Rate Income (Aristotle Pacific)	RH		
	PSF Total Return (PIMCO)	M1		
	Vanguard VIF Total Bond Market Index	VB		
	Western Asset Var Glbl High Yield Bond	W5	N/A	N/A

Primary Insured's Name:	First MI Last	Policy Number			
	•	nent Allocations (Conti	•		
Transfer FROM Enter \$ or %		ment options	Internal Use Code	Transfer TO Enter \$ or %	Future Payment Allocation %
	Indexed A	ccount Options			
	Pacific Life-1 Year Indexed	•	V1, VX		
	Pacific Life-1 Year Indexed	d Account 4 (1-Year No Cap)	V6, TX		
		Account 6 (1-Year High Cap)	UX		
	Pacific Life-2 Year Indexed	, , , , , ,	II		
	Fixed ac	count Options			
	Pacific Life-Fixed Account	1			
	Other Approved Inve	estment Options (write in)			
8. Signatures					
if these instructions are unwill correspond to the time If you are signing on beha You further represent that signatures (in the case of SIGNED AND DATED ON	clear. In the event that PLIC an and date that PLIC and/or a PL If of an entity, you represent th all requirements of those entit a Corporation and/or Trust), he	and/or a PLIC authorized third-party d/or a PLIC authorized third-party. IC authorized third-party (ies) recently you are authorized to executies, including the use of any seasone been met.	y(ies) needs clarificeives such clarifice this document	fication, the effective dat cation. and to make the statem	e of the transaction ents that are shown.
Date (mm/dd/yyyy)		Print Name: First	MI Last		Title, if applicable
X			_50		
Policyowner's Signature					
		Print Name: First	MI Last		Title, if applicable
X Assignee's Signature					
Assignee's Signature		Print Name: First	MI Last		Title, if applicable
X		Timerramo. Tilot	WII LUOT		тио, п аррпоавю
Other Required Signature	e (Must check a box below)				
	☐ Additional Policyowner ☐ Additional Assignee ☐ Incurred	[[Attorney-in-Fa	eneficiary	
Indicate role of "Other Required" signature:	☐ Insured ☐ Additional Insured ☐ Business Entity's Authoriz	L ced Representative		or/Remitter ner (only required for ow y required at time of app	. • .

Trustee

Other:

	Instructions				
When to use this form:	This form is used to allocate payments, rebalance and/or transfer investment options using the variable transfer services available on your variable life insurance policy.				
Who must sign this form:	Policyowner(s) – Required signature(s).				
	Assignee(s) – Required when the policy has an active assignmed according to the assignment agreement.	nent(s) and the assignee's signature or consent is			
	Other Required Signature(s) – Any party that has an ownership interest that requires them to approve this policy request. Indicate their signing capacity by checking the appropriate role.				
	If the policyowner, assignee or other required signing party is a Corporation, Business Entity, or Trust, all signatures required by the governing documents or the trust agreement (if a Trust) must be included, in addition to the authorized representative(s) title or signing capacity.				
Where to send this form:	Regular mail: Pacific Life Insurance Company Consumer Markets Division – Life Insurance P.O. Box 2030 Omaha, NE 68103-2030 Overnight mail: Pacific Life Insurance Company Consumer Markets Division – Life Insurance 6750 Mercy Rd Omaha, NE 68106	Fax: (866) 398-0467 In-force policy e-mail: Transactions@pacificlife.com Customer Service: (800) 347-7787			