



**MONY Life Insurance Company of America**

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**MONY Dollar Cost Averaging (DCA)  
Enrollment Form  
Variable Annuity/C-VA/L-VA  
Form No. 15916LL (12/10)**

**I. DCA TRANSFER PROGRAM**

Select One:  Initiate Dollar Cost Averaging Program  Change existing Dollar Cost Averaging Program

I wish to transfer \$\_\_\_\_\_ at regular intervals from my Money Market subaccount to the subaccounts selected below.

Minimum Purchase Payment required to participate in the program is \$5,000.

Select one of the following transfer periods:

\_\_\_\_\_ Number of Transfers  Continue transfers until the Money Market Subaccount is depleted

Please select the frequency of transfers:

\_\_\_\_\_ Monthly – 10<sup>th</sup> day of each month  Quarterly-10<sup>th</sup> day of month (March, June, September, December)

- The amount of money transferred from the Money Market subaccount will be level amount for the selected period
- The final transfer, if less than the amount indicated above, will be proportionately distributed to the subaccounts selected below.
- If the transfer date does not fall on the business day, the transfer will take place on the next succeeding business day.

**II. ALLOCATION OF TRANSFERS (in whole dollars)**

All Asset Allocation	_____ %	EQ/Large Cap Value PLUS	_____ %	Invesco V.I. Technology	_____ %
AXA Aggressive Allocation	_____ %	EQ/Lord Abbett Growth and Income	_____ %	Janus Aspen Forty	_____ %
AXA Conservative Allocation	_____ %	EQ/Mid Cap Index	_____ %	Janus Aspen Series Overseas	_____ %
AXA Conservative-Plus Allocation	_____ %	EQ/Mid Cap Value PLUS	_____ %	MFS® Utilities	_____ %
AXA Moderate Allocation	_____ %	EQ/Money Market	_____ %	Multimanager Multi-Sector Bond	_____ %
AXA Moderate-Plus Allocation	_____ %	EQ/Montag Caldwell Growth	_____ %	Multimanager Small Cap Growth	_____ %
EQ/AllianceBernstein Small Cap Growth	_____ %	EQ/Morgan Stanley Mid Cap Growth	_____ %	Oppenheimer Global Securities	_____ %
EQ/BlackRock Basic Value Equity	_____ %	EQ/PIMCO Ultra Short Bond	_____ %	PIMCO Global Bond (Unhedged)	_____ %
EQ/Boston Advisors Equity Income	_____ %	EQ/Small Company Index	_____ %	ProFund VP Bear	_____ %
EQ/Calvert Socially Responsible	_____ %	EQ/UBS Growth and Income	_____ %	ProFund VP Rising Rates Opportunity	_____ %
EQ/Capital Guardian Research	_____ %	Franklin Income Securities	_____ %	ProFund VP UltraBull	_____ %
EQ/Core Bond Index	_____ %	Franklin Rising Dividends Securities	_____ %	<b>Total</b>	_____ %
EQ/GAMCO Mergers and Acquisitions	_____ %	Invesco Van Kampen V.I. Global Value	_____ %		
EQ/GAMCO Small Company Value	_____ %	Equity	_____ %		
EQ/Global Multi-Sector Equity	_____ %	Invesco V.I. Financial Services	_____ %		
EQ/Intermediate Government Bond Index	_____ %	Invesco V.I. Global Health Care	_____ %		

I hereby authorize MONY Life Insurance Company of America (MONY) to enroll me in the Dollar Cost Averaging Program. The terms of this authorization will remain in effect until the contract/policy matures, contract/policy is surrendered, I cancel my participation in the DCA Program in writing or by phone (subject to telephone procedures) or a subsequent authorization is submitted. Subsequent authorization will be effective on the 10<sup>th</sup> day of the month/quarter if received by MONY on or before the 8<sup>th</sup> day of the applicable month/quarter. MONY does not currently assess a charge for this program, but it reserves the right to assess a charge. MONY reserves the right to terminate or change the terms and conditions of the program, at any time, effective 15 days from the date of written notice of such termination or charge.

This program may not be used concurrently with the Dollar Cost Averaging Plus Program or any automatic re-balancing program. The DCA program does not provide me, the owner, with assurance of the profit and does not guarantee protection against a loss in declining markets. I will not look to MONY to indemnify me for any investment loss I may suffer as a result of my participation in the program.

Owner Name (signature) \_\_\_\_\_ Contract No. \_\_\_\_\_ Date \_\_\_\_\_

Owner Name (print) \_\_\_\_\_ Telephone No. \_\_\_\_\_

Annuitant Name (if different from Owner-print) \_\_\_\_\_

Registered Representative Signature \_\_\_\_\_ Telephone No. \_\_\_\_\_

Date Received by Reg. Rep \_\_\_\_\_ Date Received by BGA/Agency \_\_\_\_\_