EXHIBIT C
John Hancock Life Insurance Company of New York
100 Summit Lake Drive
Valhalla, New York 10595

Annuities Servicing Center:
P.O. Box 111, S-08
Boston, Massachusetts 02117

Overnight Mailing Address:
380 Stuart Street
Boston, Massachusetts 02116

Single Premium Immediate Fixed Annuity

The John Hancock Life Insurance Company of New York agrees, subject to the conditions and provisions of this contract, to pay the Annuity Payments at the Annuities Service Center.

The Annuity Payments will be made as specified in Section 1. Annuity Payments will be made to the person or persons designated in that section until otherwise directed by the Owner.

The contract is issued in consideration of the Application, a copy of which is attached and made a part of the contract, and the payment of the Single Premium.

The conditions and provisions on the Application and the following pages are part of the contract.

Owner’s 10 Day Right to Cancel - This contract may be returned by delivering or mailing it within 10 days after its receipt to the Company’s Annuities Service Center, or to the agent or agency office through which it was delivered. Immediately upon such delivery or mailing, the contract shall be deemed cancelled and void from the beginning. Any premium paid will then be refunded within 10 days of cancellation.

Signed for the Company at Boston, Massachusetts.

President

Secretary

Single Premium Immediate Annuity with payments, amounts and period limitations as described in Section 1.

Not eligible for dividends.
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<th>1. CONTRACT SPECIFICATIONS</th>
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<tr>
<td>ANNUTY CONTRACT NUMBER</td>
</tr>
<tr>
<td>ANNUITANT (Measuring Life)</td>
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<tr>
<td>OWNER</td>
</tr>
<tr>
<td>SINGLE PREMIUM</td>
</tr>
<tr>
<td>AGE OF ANNUITANT AT ISSUE</td>
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<tr>
<td>DATE OF ISSUE</td>
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<tr>
<td>INITIAL ANNUITY PAYMENT</td>
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<tr>
<td>FIRST PAYMENT DATE</td>
</tr>
<tr>
<td>ANNUITY PAYMENT INTERVAL</td>
</tr>
<tr>
<td>PAYEE AT ISSUE</td>
</tr>
<tr>
<td>BENEFICIARY(IES) AT ISSUE</td>
</tr>
</tbody>
</table>
### Application for Single Premium Immediate Annuity

| 1 | Measuring Life | Jerry E. Sherman | (716)773-5484 |
|   | Full Name      | 1088 Baseline Road, Grand Island, NY 14072 | Phone |
|   | Address        | Date of Birth (Mo. / Day / Yr.) | |
| 2 | Joint Measuring Life (If applicable) | Full Name | Phone |
|   | Address        | Date of Birth (Mo. / Day / Yr.) | |
|   | Social Security Number | Male | Female |
| 3 | Owner | John Hancock Assignment Company | (664)277-5477 |
|   | Full Name      | Phone |
|   | Address        | |
| 3A | Applicant (If different than Owner) | | |
| 4 | Payee (will be Measuring Life if left blank) | Refer to Addendum No. 1 | Phone |
|   | Full Name      | Address |
| 5 | Payment Information | (Submit proof of age for life or joint life payments.) |

Refer to Addendum No. 1
Description of Periodic Payments
**JOHN HANCOCK LIFE INSURANCE COMPANY OF NEW YORK**

**Valhalla, NY 10595**

**APPLICATION FOR SINGLE PREMIUM IMMEDIATE ANNUITY**

(continued)

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<tbody>
<tr>
<td><strong>Beneficiary</strong></td>
<td>For each designated Beneficiary, the following information must be supplied:</td>
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<tr>
<td><strong>Full Name</strong></td>
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<tr>
<td><strong>Relationship to Measuring Life</strong></td>
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<tr>
<td><strong>Phone</strong></td>
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<tr>
<td><strong>Address</strong></td>
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<tr>
<td><strong>Social Security Number</strong></td>
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See Attached

7 Premium

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<th>Valuable Consideration</th>
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8 Replacement

Is this annuity applied for replacing or changing any existing annuity or life insurance?  
- Yes  
- No  
If yes, provide issuer and contract number:

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The immediate Annuity applied for does not provide a cash surrender or death benefit. However, under some options, scheduled payments may continue beyond the death of the Measuring Life. The form of annuity indicated above and as described herein, will determine what, if anything, is payable after death.

The Applicant represents that all statements and answers on this application are true to the best of his or her knowledge and belief and completely recorded herein.

Any person, who with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud.

**Signature**  

**Applicant**

Signed at Mahwah, New York 11747

**City, State**

**Date:** 04/30/2015

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**Agent Signature and License Identification Number**

Agent: Is the annuity applied for intended to replace or change any existing annuity or life insurance?  
- Yes  
- No
Addendum No. 1
Description of Periodic Payments

Payee (1):      Jerry E. Sherman
Payee Address:  1686 Baseline Road
                Grand Island, NY 14072

Beneficiary:    Ryan Sherman
                1686 Baseline Road
                Grand Island, NY 14072

Contingent Beneficiary: Charles Staub

Benefit(s):
1. Life with Certain Annuity - $3,214.76 for life, payable monthly, guaranteed for 16 year(s), beginning on 04/01/2012, with the last guaranteed payment on 03/01/2028.
2. DEFINITIONS

"Application" means the application for this contract attached to and made part of this contract.

"Annuitant" (Measuring Life means the person on whose life the Annuity Payments will be based if a life contingent Annuity Option is selected.

"Annuity Option(s)" means the method of periodic payment selected by You for Annuity Payments made by Us. Once selected, the Annuity Option(s) cannot be changed.

"Annuity Payment" means the periodic payments John Hancock makes to Payee on and after First Payment Date.

"Annuities Service Center" means our service office that is located on the first page of this contract, until you are notified in writing of a change.

"Beneficiary" means the person(s) or entity so named in the Application and to which Annuity Payments are due on the death of the Annuitant(s). The Beneficiary is as specified on the Contract Specifications page, unless later changed by you as provided in Section 3 of the Contract.

"Co-Annuitant" means another person on whose life Annuity Payments will be based if a Contingent Annuity option or Joint Annuity option is selected. The Co-Annuitant cannot be changed once an Annuity Option is selected, regardless of death, divorce or remarriage, except to reflect a legal change in surname due to divorce or remarriage.

"Contract Specifications" means the page of this contract so titled (Section 1) which shows you the benefits, first payment date, and other information.

"Date of issue" means the day the contract is issued.

"First Payment Date" refers to the date the first Annuity Payment is due to the Payee.

"Payee" means any of the person(s) or entity to whom Annuity Payments are to be made.

"Single Premium" means amount paid to John Hancock in consideration of benefits provided by this contract.

"We", "us" and "our" refer only to the John Hancock Life Insurance Company of New York.

"Written Notice" means, unless otherwise stated, a written notice received at our Annuities Service Center.

"You" and "your" refer only to party(s) named as Owner in the Application and Contract Specifications page that has the authority to act pursuant to the terms of Section 3 of the Contract.

3. OWNER

The Owner will be as shown in the Contract Specifications page unless changed by you.

You shall have the sole and absolute power to exercise all rights and privileges without the consent of any other person unless you provide otherwise by Written Notice.

You, the Owner, may change the Owner, Payee or Beneficiary by Written Notice. A change will take effect when the Written Notice is signed by you, and we acknowledge receipt of the Written Notice at our Annuities Service Center. The change will take effect whether or not the Owner, Payee or Beneficiary is alive at the time of the acknowledgment. A change: (i) will take effect only with respect to an Annuity Payment due after the effective date of such change; and (ii) shall be subject to the rights of any assignee of record with us; and (iii) will be subject to any Annuity Payment made or action taken by us before the acknowledgment.
John Hancock Life Insurance Company (U.S.A.)
Lansing, Michigan

John Hancock

EVIDENCE OF GUARANTEE

John Hancock Life Insurance Company (U.S.A.) ("John Hancock") guarantees any payment or other obligation required to be made or performed by John Hancock Assignment Company ("JHAC"), a wholly-owned subsidiary of John Hancock, under the terms of any and all qualified assignments (as defined under Section 130 of the United States Internal Revenue Code) that JHAC enters into on or after January 1, 2010 in connection with which JHAC purchases annuities from John Hancock or its subsidiaries.

Hugh McHaffie
Executive Vice President
John Hancock Wealth Management

This Evidence of Guarantee is not an insurance policy.