

SERFF Tracking Number: GEFA-125889045 State: Arkansas
Filing Company: Genworth Life and Annuity Insurance Company State Tracking Number: 41051
Company Tracking Number:
TOI: L04I Individual Life - Term Sub-TOI: L04I.003 Single Life - Single Premium
Product Name: GLAIC Paid-Up Term CIR 11-2008
Project Name/Number: GLAIC Paid-Up Term CIR 11-2008/GLAIC Paid-Up Term CIR 11-2008

Filing at a Glance

Company: Genworth Life and Annuity Insurance Company

Product Name: GLAIC Paid-Up Term CIR 11- 2008 SERFF Tr Num: GEFA-125889045 State: ArkansasLH

TOI: L04I Individual Life - Term SERFF Status: Closed State Tr Num: 41051
Sub-TOI: L04I.003 Single Life - Single Premium Co Tr Num: State Status: Approved-Closed
Filing Type: Form Co Status: Reviewer(s): Linda Bird
Authors: April Bauserman, Renee Benard, Kristin Wade Disposition Date: 12/11/2008
Date Submitted: 12/09/2008 Disposition Status: Approved
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: GLAIC Paid-Up Term CIR 11-2008
Project Number: GLAIC Paid-Up Term CIR 11-2008
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 12/11/2008
State Status Changed: 12/11/2008
Corresponding Filing Tracking Number:

Filing Description:

Genworth Life and Annuity Insurance Company
NAIC# 4011-65536 FEIN# 54-0283385
Individual Life Filing

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Individual
Group Market Size:
Group Market Type:
Deemer Date:

Form Number: GLAPUCIR1108 - Paid-Up Term Insurance Policy

SERFF Tracking Number: GEFA-125889045 *State:* Arkansas
Filing Company: Genworth Life and Annuity Insurance Company *State Tracking Number:* 41051
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**Actuarial Memorandum
Readability Certification**

Dear Commissioner/Director:

Enclosed for your approval is a specimen copy of the above referenced form. This form is new and does not replace any forms previously approved by your department. This form is being filed for Genworth Life and Annuity Insurance Company. Under separate cover, it is also being filed for Genworth Life Insurance Company.

Policy form GLAPUCIR1108 is a paid-up term life insurance policy that will be issued to an Insured Child named in a child rider pursuant to the terms of the child rider, upon the death of the primary insured of the life policy to which the child rider is attached. This includes previously approved and currently issued Children's Level Term Insurance Rider, Form No. GLATLRC11107 et al attached to term life insurance policies and Form No. ONE-CIR-100 et al attached to universal life insurance policies as well as previously approved and in force child riders that are no longer marketed.

Applicable certifications, filing forms and fees, if any, are enclosed.

Thank you, in advance, for your assistance with this filing

Sincerely,

Kristin Wade
Product Development Department
Telephone Number: 434-948-5138
Kristin.Wade@genworth.com

SERFF Tracking Number: GEFA-125889045 State: Arkansas
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 Product Name: GLAIC Paid-Up Term CIR 11-2008
 Project Name/Number: GLAIC Paid-Up Term CIR 11-2008/GLAIC Paid-Up Term CIR 11-2008

Company and Contact

Filing Contact Information

Kristin Wade, Product Development Analyst Kristin.Wade@genworth.com
 700 Main Street (434) 948-5138 [Phone]
 Lynchburg, VA 24504 (434) 948-5934[FAX]

Filing Company Information

Genworth Life and Annuity Insurance Company CoCode: 65536 State of Domicile: Virginia
 6620 W Broad Street Group Code: 350 Company Type: LifeHealth &
 Annuity
 Richmond, VA 23230 Group Name: State ID Number:
 (804) 281-6600 ext. [Phone] FEIN Number: 54-0283385

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: \$50.00 per policy submission x 1 submission = \$50.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Genworth Life and Annuity Insurance Company	\$50.00	12/09/2008	24415823

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	12/11/2008	12/11/2008

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Statement of Variability		Yes
Supporting Document	Paid-Up Term Cash Values		Yes
Form	Paid-Up Term Life Insurance Policy		Yes

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Form Schedule

Lead Form Number:

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	GLAPUCIR1108	Policy/Cont Paid-Up Term Life ract/Fratern Insurance Policy al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		56	GLAPUCIR1108.pdf

Genworth Life and Annuity Insurance Company

A Stock Company State of Domicile: Virginia
Home Office: [6610 West Broad Street, Richmond, VA 23230]
Service Center Address: [3100 Albert Lankford Drive, Lynchburg, Virginia 24501]
[P. O. Box 461, Lynchburg, VA 24505-0461]

Service Center Phone: [1-888-325-5433]

SCHEDULE

INSURED: [JOHNNY DOE] DATE OF BIRTH: [MARCH 15, 2001]
AMOUNT OF INSURANCE: \$ [10,000] POLICY NUMBER: [SPECIMEN-2]
DATE OF ISSUE: [OCTOBER 3, 2008] EXPIRY DATE: [MARCH 15, 2026]
OWNER: [MARY DOE] BENEFICIARY: [MARY DOE]
NUMBER OF ORIGINAL POLICY: [SPECIMEN] DATE OF ORIGINAL POLICY: [APRIL 15, 2001]
MORTALITY TABLE: [2001 Commissioners Standard Ordinary Mortality Table, Sex Distinct, Age Last Birthday.]
INTEREST RATE [4] % per year, compounded annually.

This Paid-up Policy is issued according to the provisions of the Children's Level Term Insurance Rider (Child Rider) attached to the policy referred to above as "Original Policy."

Subject to the terms of this Policy, the Company will pay the Amount of Insurance shown in the Schedule to the Beneficiary. The Company will not pay until it has received this Policy and due proof that the Insured died on or after the Date of Issue and on or before the Expiry Date.

This Policy was signed on the Date of Issue.

President

Secretary

**PAID-UP TERM LIFE INSURANCE POLICY
INSURANCE PAYABLE AT DEATH PRIOR TO EXPIRY DATE
CONVERTIBLE AS OF THE EXPIRY DATE
Nonparticipating**

GENERAL PROVISIONS

THE CONTRACT. This Policy constitutes the entire contract between the Company and the Owner. This Policy cannot be changed or altered unless changed or altered in writing with the consent of our authorized officers.

EXPIRY DATE. The Expiry Date is the date on which this Policy ends. No coverage is provided under this Policy on or after the Expiry Date.

POLICY YEARS. The Expiry Date will be used to determine policy years and policy anniversaries.

CONTROL OF POLICY. Unless otherwise provided, during the minority of the Insured, the right to exercise all privileges under this Policy and to agree with the Company as to any change in or amendment to this Policy will vest successively, during their respective lifetimes, in the Owner, named in the Schedule, the Owner's estate, and the Insured. After the Insured has attained majority these rights will vest solely in the Insured.

BENEFICIARY. The Owner may change the Beneficiary designation at any time prior to the Expiry Date by providing the Company written notice in a form satisfactory to the Company. Any such change takes effect as of the date the notice is signed. However, the change will not affect any payment made or action taken before the Company received the notice.

Benefits payable at the Insured's death will be paid according to the beneficiary designation then in effect. If no Beneficiary is alive at the Insured's death, payment will be made to the Owner's estate unless otherwise provided herein.

ASSIGNMENT. An assignment will not bind the Company until such assignment is filed with the Company at its Service Center. Unless otherwise specified by the Owner, the assignment takes effect on the date signed by the Owner. The Company will not be obliged to ensure the assignment is valid or effective. An irrevocable Beneficiary must consent in writing to any assignment. Spousal consent is required if the Owner lives in a community property state.

MISSTATEMENT OF DATE OF BIRTH. If the Insured's date of birth has been misstated, the Expiry Date will be amended based on the correct date of birth.

INCONTESTABILITY. This Policy is incontestable from the Date of Issue.

NONPARTICIPATING. This Policy does not share in any distribution of surplus. No dividends are payable.

CASH VALUE

This Policy may be surrendered at any time prior to the Expiry Date for its cash value. On any day, the cash value will be equal to the net single premium at the attained age of the Insured for the remaining term insurance based on the Mortality Table and Interest Rate shown in the Schedule and the Insured's age on that date. However, if the date of surrender is within 30 days after a policy anniversary, the cash value will be at least the cash value on that policy anniversary. The Company may defer payment of any cash surrender value up to six (6) months after receipt of the request for surrender.

CONVERSION

On written request, the Owner may convert this Paid-up policy as of the Expiry Date to a plan of life insurance the Company then makes available for this purpose. Evidence of insurability is not required. The date of conversion will be the Expiry Date shown in the Schedule. The amount of insurance of the new policy may not be greater than five times the Amount of Insurance shown in the Schedule and not less than the minimum allowed for the new policy. Premiums for the new policy will be based on the Insured's age nearest birthday on the date of conversion for the rates then in use under the new policy. The premium class will be the Standard No Nicotine Use Class unless on the date of conversion the Standard No Nicotine Use Class is not available. In that case, the Company, at its sole discretion, will assign a comparable class. Upon written request, return of this policy, and without evidence of insurability, the Company will provide a conversion policy. This Paid-up policy will terminate upon issue of the conversion policy.

SETTLEMENT

Any sums payable by the Company under this Policy will be paid in a lump sum from its Service Center.

**PAID-UP TERM LIFE INSURANCE POLICY
INSURANCE PAYABLE AT DEATH PRIOR TO EXPIRY DATE
CONVERTIBLE AS OF THE EXPIRY DATE
Nonparticipating**

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Supporting Document Schedules

Review Status:
Satisfied -Name: Certification/Notice 11/05/2008
Comments:
Attachment:
GLAIC Generic Signed Readability.pdf

Review Status:
Satisfied -Name: Statement of Variability 12/08/2008
Comments:
Attachment:
Paid-Up Term SOV generic.pdf

Review Status:
Satisfied -Name: Paid-Up Term Cash Values 12/09/2008
Comments:
Attachment:
Child Rider PU Cash Values 10-3-08.pdf

Using a computer software program, the Flesch reading ease test score is:

<u>Form No.</u>	<u>Title</u>	<u>Score</u>
GLAPUCIR1108	Paid-Up Term Life Insurance Policy	56.5

12/04/2008
Date



Nancy Robertson
Vice President

Statement of Variability for Form(s) GLAPUCIR1108 & GLIPUCIR1108

Variable Data - Bracketed	Explanation
Address	Accommodates changes in home office address and servicing location.
Service Center Phone	Accommodates changes in the phone number for the servicing center.
Officer Signatures	Accommodates changes of corporate officers.
SCHEDULE	
Insured	Reflects actual name of the Insured
Date of Birth	Reflects the actual date of birth of the Insured, previously the Insured Child.
Amount of Insurance	Reflects the dollar amount of coverage on the Insured's life. Range is \$1,000 - \$10,000.
Policy Number	Reflects a unique number assigned to this policy by the system
Date of Issue	Reflects the date the policy is generated by the system.
Expiry Date	Reflects the date on which the policy may be converted; on the Insured's twenty-first, twenty-third or twenty-fifth birthday.
Owner	Reflects the name of the Owner and would permit a change to reflect the actual name of Owner.
Beneficiary	Reflects the name of the Beneficiary from the original policy to which the child rider was attached and would permit a change to reflect the actual name of Beneficiary.
Number of Original Policy	Reflects the policy number of the original policy to which the child rider was attached.
Date of Original Policy	Reflects the date of issue of the original policy to which the child rider was attached.
State Insurance Department's Phone Number	Accommodates changes for each state insurance department's phone number.
Mortality Table	Reflects the Mortality Table that will be used with this product.
Interest Rate	Reflects the rate of interest credited to the Policy Value. Range is 4% - 5 %.

Child Rider PU Cash Values
2001 CSO Aggregate Mortality

		To Age 25		PV 1 Day After Age 25		Total PV		Age	Male Q	Female Q		
		Curtate NSP		Curtate NSP		Curtate NSP						
		Age	Male	Female	Male	Female	Male	Female				
I =	0.04											
Delta =	0.0392207											
I/Delta =	1.0198693											
Sex	M	0	7.776266	4.792130	0.000000	0.000000	7.776266	4.792130	0	0.00072	0.00042	0
Expiry Age =	25	1	7.372625	4.565733	0.000000	0.000000	7.372625	4.565733	1	0.00046	0.00031	1
Expiry + 1 Day?	N	2	7.210847	4.439738	0.000000	0.000000	7.210847	4.439738	2	0.00033	0.00023	2
DOD of Base Insured	7/6/2007	3	7.171647	4.388337	0.000000	0.000000	7.171647	4.388337	3	0.00024	0.0002	3
DOB of Child	7/6/1997	4	7.220246	4.364744	0.000000	0.000000	7.220246	4.364744	4	0.00021	0.00019	4
Prior Birthday	7/6/2007	5	7.300589	4.350160	0.000000	0.000000	7.300589	4.350160	5	0.00021	0.00018	5
Next Birthday	7/6/2008	6	7.384163	4.344948	0.000000	0.000000	7.384163	4.344948	6	0.00022	0.00019	6
Age on Prior Birthday	10	7	7.461171	4.329569	0.000000	0.000000	7.461171	4.329569	7	0.00022	0.00021	7
Age on Next Birthday	9	8	7.541277	4.293653	0.000000	0.000000	7.541277	4.293653	8	0.00022	0.00021	8
NSP on Prior Birthday	7.70136	9	7.624606	4.256293	0.000000	0.000000	7.624606	4.256293	9	0.00023	0.00021	9
NSP on Next Birthday	7.62461	10	7.701361	4.217431	0.000000	0.000000	7.701361	4.217431	10	0.00024	0.00022	10
NSP on DOD of Base Insured	7.70136	11	7.771281	4.167045	0.000000	0.000000	7.771281	4.167045	11	0.00028	0.00025	11
		12	7.804317	4.084748	0.000000	0.000000	7.804317	4.084748	12	0.00034	0.00027	12
		13	7.779135	3.979212	0.000000	0.000000	7.779135	3.979212	13	0.0004	0.00031	13
		14	7.693378	3.829568	0.000000	0.000000	7.693378	3.829568	14	0.00052	0.00034	14
		15	7.485005	3.643989	0.000000	0.000000	7.485005	3.643989	15	0.00066	0.00036	15
		16	7.129111	3.430984	0.000000	0.000000	7.129111	3.430984	16	0.00078	0.00039	16
		17	6.639454	3.179464	0.000000	0.000000	6.639454	3.179464	17	0.00089	0.00041	17
		18	6.020390	2.897830	0.000000	0.000000	6.020390	2.897830	18	0.00095	0.00044	18
		19	5.316256	2.574876	0.000000	0.000000	5.316256	2.574876	19	0.00098	0.00046	19
		20	4.553369	2.218892	0.000000	0.000000	4.553369	2.218892	20	0.001	0.00047	20
		21	3.739243	1.838512	0.000000	0.000000	3.739243	1.838512	21	0.00101	0.00049	21
		22	2.881723	1.422749	0.000000	0.000000	2.881723	1.422749	22	0.00102	0.0005	22
		23	1.979010	0.980150	0.000000	0.000000	1.979010	0.980150	23	0.00104	0.00051	23
		24	1.019231	0.509615	0.000000	0.000000	1.019231	0.509615	24	0.00106	0.00053	24
		25	0.000000	0.000000	0.000000	0.000000	0.000000	0.000000	25	0.00109	0.00055	25

Curtate

Continuous

* - Table B (80% male / 20% Female)