

SERFF Tracking Number: GRJR-125620386 State: Arkansas  
Filing Company: The Cincinnati Life Insurance Company State Tracking Number: 38862  
Company Tracking Number: CLI136ACTMEMO  
TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life -  
Fixed/Indeterminate Premium  
Product Name: Form CLI-136-AR (2/05), Actuarial Memorandum  
Project Name/Number: Form CLI-136-AR (2/05), Actuarial Memorandum/Form CLI-136-AR (2/05), Actuarial Memorandum

## Filing at a Glance

Company: The Cincinnati Life Insurance Company

Product Name: Form CLI-136-AR (2/05), SERFF Tr Num: GRJR-125620386 State: ArkansasLH  
Actuarial Memorandum

TOI: L04I Individual Life - Term SERFF Status: Closed State Tr Num: 38862  
Sub-TOI: L04I.103 Renewable - Single Life - Co Tr Num: CLI136ACTMEMO State Status: Filed-Closed  
Fixed/Indeterminate Premium

Filing Type: Form Co Status: Submitted Reviewer(s): Linda Bird  
Author: Jennifer Henley Disposition Date: 05/05/2008  
Date Submitted: 05/02/2008 Disposition Status: Accepted For  
Informational Purposes  
Implementation Date Requested: 06/01/2008 Implementation Date:

State Filing Description:

## General Information

Project Name: Form CLI-136-AR (2/05), Actuarial Memorandum  
Project Number: Form CLI-136-AR (2/05), Actuarial Memorandum  
Requested Filing Mode: Informational

Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:  
Filing Status Changed: 05/05/2008  
State Status Changed: 05/05/2008  
Corresponding Filing Tracking Number:

Filing Description:  
FEIN: 31-1213778  
NAIC: 0244-76236

Status of Filing in Domicile: Pending  
Date Approved in Domicile:  
Domicile Status Comments: This filing has been  
submitted to our domiciliary state, Ohio.  
Market Type: Individual  
Group Market Size:  
Group Market Type:  
Deemer Date:

Subject:

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The Cincinnati Life Insurance Company

Individual Life Forms Informational Filing

Actuarial Memorandum for Form CLI-136-AR (2/05), Level Term Life Insurance to Expiry Date Policy, previously approved by your Department on March 17, 2005.

Dear Sir or Madam:

We are submitting, for your information, a revised Actuarial Memorandum for the subject policy form which was approved by your Department as referenced above. The new Actuarial Memorandum reflects the following changes:

1. Cash Value Percentages have been revised so that the product more easily and consistently demonstrates compliance with cash value smoothness testing requirements;
2. The addition of the Super Select Plus underwriting class;
3. The addition of issue age banding for amounts of \$25,000 - \$99,999; \$100,000 - \$999,999; and \$1,000,000 and higher;
4. A change in some available issue ages depending upon the plan and benefit amount; and
5. A slight change to the paragraph that addresses conversion so that it reflects the revised Conversion Policy provision language in a recently filed amendatory rider.

We certify that no other changes have been made to the Actuarial Memorandum and that the Guaranteed Maximum Premium Rates, as previously submitted, are not affected.

The implementation date for these changes will be June 1, 2008.

Nothing in this filing has been previously disapproved by your Department. It does not contain any condition, feature or concept that departs from those generally used by the industry and that could be construed as new, innovative, uncommon or unusual.

This informational submission was made to our domiciliary state, Ohio.

Your acknowledgement of this filing is greatly appreciated. Thank you for your usual courtesy and cooperation.

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Sincerely,

Jennifer Henley  
 Analyst, Life Forms and Filing  
 Phone: 513-870-2251 Fax: 513-870-2099  
 E-mail: jenny\_henley@cinfin.com

## Company and Contact

### Filing Contact Information

Jennifer Henley, Analyst jenny\_henley@cinfin.com  
 P.O. Box 145496 (513) 870-2251 [Phone]  
 Cincinnati, OH 45250-5496 (513) 870-2099[FAX]

### Filing Company Information

The Cincinnati Life Insurance Company CoCode: 76236 State of Domicile: Ohio  
 6200 S. Gilmore Road Group Code: 244 Company Type:  
 Fairfield, OH 45014 Group Name: State ID Number:  
 (513) 870-2654 ext. [Phone] FEIN Number: 31-1213778

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: 1 form X \$50.00 = \$50.00  
 Per Company: No

| COMPANY                               | AMOUNT  | DATE PROCESSED | TRANSACTION # |
|---------------------------------------|---------|----------------|---------------|
| The Cincinnati Life Insurance Company | \$50.00 | 05/02/2008     | 20069586      |



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## **Disposition**

Disposition Date: 05/05/2008

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.



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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

### Review Status:

**Satisfied -Name:** Certification/Notice 04/23/2008

**Comments:**

**Attachment:**

AR Certification Of Compliance.pdf

### Review Status:

**Bypassed -Name:** Application 04/23/2008

**Bypass Reason:** This is not a policy filing. No application is being submitted for approval.

**Comments:**

THE CINCINNATI LIFE INSURANCE COMPANY

Arkansas

CERTIFICATION

Re: Form CLI-136 (2/05), Actuarial Memorandum

I, Roger A. Brown, FSA, MAAA an officer of The Cincinnati Life Insurance Company, certify that I have reviewed or supervised the review of the policy forms contained in this filing and hereby certify that they are in compliance with Regulation 19 and, to the best of my knowledge and belief, are in compliance with all applicable requirements of the Arkansas Insurance Department.

I also certify that an important notice, as required by Ark. Code Ann. 23-79-138, and the Notice of Arkansas Life and Disability Insurance Guaranty Association, as required by Regulation 49, will be included with all issues of policy forms.



\_\_\_\_\_  
Officer

\_\_\_\_\_  
April 30, 2008

Date

\_\_\_\_\_  
Assistant Secretary

Title