

SERFF Tracking Number: LAFA-125756368 State: Arkansas
Filing Company: The Lafayette Life Insurance Company State Tracking Number: 39806
Company Tracking Number:
TOI: L04I Individual Life - Term Sub-TOI: L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: TLR-08
Project Name/Number: /

Filing at a Glance

Company: The Lafayette Life Insurance Company

Product Name: TLR-08 SERFF Tr Num: LAFA-125756368 State: ArkansasLH
TOI: L04I Individual Life - Term SERFF Status: Closed State Tr Num: 39806
Sub-TOI: L04I.213 Specified Age or Duration - Co Tr Num: State Status: Approved-Closed
Fixed/Indeterminate Premium - Single Life
Filing Type: Form Co Status: Reviewer(s): Linda Bird
Author: Katrina Donnoe Disposition Date: 08/06/2008
Date Submitted: 07/31/2008 Disposition Status: Approved
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Authorized
Project Number: Date Approved in Domicile: 07/23/2008
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: Group Market Type:
Filing Status Changed: 08/06/2008
State Status Changed: 08/06/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
Please see attached cover letter. Thank you.

Company and Contact

Filing Contact Information

Kate Donnoe, Senior Compliance Analyst kate.donnoe@llic.com

SERFF Tracking Number: Lafa-125756368 State: Arkansas
Filing Company: The Lafayette Life Insurance Company State Tracking Number: 39806
Company Tracking Number:
TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08
Project Name/Number: /

1905 Teal Rd (800) 443-8793 [Phone]
Lafayette, IN 47906 (765) 477-3212[FAX]

Filing Company Information

The Lafayette Life Insurance Company CoCode: 65242 State of Domicile: Indiana
PO Box 7007 Group Code: 836 Company Type: Life and Annuity
Lafayette, IN 47903 Group Name: State ID Number:
(800) 443-8793 ext. 3417[Phone] FEIN Number: 35-0457540

SERFF Tracking Number: LAF A-125756368 State: Arkansas
Filing Company: The Lafayette Life Insurance Company State Tracking Number: 39806
Company Tracking Number:
TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: TLR-08
Project Name/Number: /

Filing Fees

Fee Required? Yes
Fee Amount: \$160.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Lafayette Life Insurance Company	\$160.00	07/31/2008	21715381

SERFF Tracking Number: LAFA-125756368

State: Arkansas

Filing Company: The Lafayette Life Insurance Company

State Tracking Number: 39806

Company Tracking Number:

TOI: L041 Individual Life - Term

Sub-TOI: L041.213 Specified Age or Duration -

Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08

Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	08/06/2008	08/06/2008

SERFF Tracking Number: Lafa-125756368

State: Arkansas

Filing Company: The Lafayette Life Insurance Company

State Tracking Number: 39806

Company Tracking Number:

TOI: L041 Individual Life - Term

Sub-TOI: L041.213 Specified Age or Duration -

Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08

Project Name/Number: /

Disposition

Disposition Date: 08/06/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: Lafa-125756368

State: Arkansas

Filing Company: The Lafayette Life Insurance Company

State Tracking Number: 39806

Company Tracking Number:

TOI: L041 Individual Life - Term

Sub-TOI: L041.213 Specified Age or Duration -

Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08

Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Cover Letter		Yes
Supporting Document	Example Policy Schedule Pages		Yes
Form	Term Life Rider		Yes
Form	Term Life Rider - Unisex		Yes
Form	Schedule Page		Yes
Form	Schedule Page		Yes
Form	Schedule Page		Yes
Form	Schedule Page		Yes
Form	Schedule Page		Yes
Form	Schedule Page		Yes

SERFF Tracking Number: LAFA-125756368 State: Arkansas
 Filing Company: The Lafayette Life Insurance Company State Tracking Number: 39806
 Company Tracking Number:
 TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
 Fixed/Indeterminate Premium - Single Life
 Product Name: TLR-08
 Project Name/Number: /

Form Schedule

Lead Form Number: TLR-08

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	TLR-08	Policy/Cont	Term Life Rider ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0	TLR-08.pdf
	TLR-08U	Policy/Cont	Term Life Rider - ract/Fratern Unisex al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0	TLR-08U.pdf
	TLR-08-10	Schedule	Schedule Page Pages	Initial		0	TLR-08- 10.pdf
	TLR-08-20	Schedule	Schedule Page Pages	Initial		0	TLR-08- 20.pdf
	TLR-08-30	Schedule	Schedule Page Pages	Initial		0	TLR-08- 30.pdf
	TLR-08U- 10	Schedule	Schedule Page Pages	Initial		0	TLR-08U- 10.pdf
	TLR-08U- 20	Schedule	Schedule Page Pages	Initial		0	TLR-08U- 20.pdf
	TLR-08U- 30	Schedule	Schedule Page Pages	Initial		0	TLR-08U- 30.pdf

The Lafayette Life Insurance Company

Term Life Insurance Rider

IN THIS RIDER

Terms used in this rider shall have the same meanings as are set forth in the policy to which this rider is attached unless otherwise defined in this rider.

DEFINITIONS

The following terms used in this rider have the following meanings:

CONVERSION DATE is the date shown immediately next to the phrase **CONVERSION DATE** on page 4M of the policy. The Conversion Date is the earlier of: the Initial Term Expiration Date, or the Rider Annual Date next following the Insured's 65th birthday.

EFFECTIVE DATE OF THIS RIDER is the Effective Date shown for this rider on page 3 of the policy.

INITIAL TERM is the period of years shown immediately next to the phrase **INITIAL TERM** on page 4M of the policy. The Initial Term commences on the Effective Date of this Rider and expires on the Initial Term Expiration Date. Once the rider has been issued, the Initial Term cannot be changed.

INITIAL TERM EXPIRATION DATE is the date shown immediately next to the phrase **INITIAL TERM EXPIRATION DATE** on page 4M of the policy.

RENEWAL DATES are Rider Annual Dates that begin on expiration of the Initial Term. The first Renewal Date and the Initial Term Expiration Date are the same date. The last Renewal Date is one year before the Premium Expiration Date shown for this rider on page 3 of the policy.

RIDER ANNUAL DATE means the same month and day each year as this rider's Effective Date shown on page 3 of the policy.

THE BENEFIT

Subject to the terms of this rider, we will pay to the beneficiary the amount of this rider shown on page 3 of the policy. We will pay the beneficiary this amount as soon as practicable after we receive due proof that the Insured has died while this rider is in force. We will pay this amount to the same beneficiary entitled to receive the Basic Amount shown on page 3 of the policy, and in the same manner as the Basic Amount is paid.

PREMIUMS

DURING THE INITIAL TERM

During the Initial Term, premiums for this rider are level. Premiums for this rider during the Initial Term are shown under Annual Premium on page 3 of the policy.

ON EACH RENEWAL DATE

On each Renewal Date, this rider may be renewed for a one-year term at an increased rate. The renewal premiums for this rider are shown for each one-year term under Renewal Premium on page 4M of the policy.

RENEWAL WITHOUT EVIDENCE

If all due premiums have been timely paid to a Renewal Date, this rider may be renewed without evidence of insurability.

CONVERSION

Subject to the terms and conditions as set forth in this rider, this rider may be converted to a new permanent life policy on the life of the Insured. Conversion must occur on or before the Conversion Date.

CONVERSION YOU ELECT

You may convert this rider to a new permanent life policy on or before the Conversion Date, if all due premiums for this rider have been paid and are not being waived. Evidence of insurability will not be required. We must receive at our Home Office your written application, and the first premium, for the new policy before we will issue it. The following rules for the new permanent life policy will apply:

- The basic amount of insurance for the new permanent life policy may not be less than the minimum that we require for it nor more than the amount of insurance for this rider shown on page 3 of the policy.
- The plan for the new policy may be any permanent life policy that we would then issue. The only exceptions are preferred risk policies and policies with term insurance or increasing insurance.
- The contestable and suicide periods for the new permanent life policy will start from this rider's Effective Date.
- The date of issue for the new permanent life policy will be the date your application is approved.
- A waiver of premium rider or a waiver of monthly deduction rider, as applicable, may be added to the new permanent life policy subject to our approval. We may require evidence of insurability to include the applicable waiver rider with the new permanent life policy.

AUTOMATIC CONVERSION BY US

Prior to Age 60 – We will automatically convert this rider to a new whole life policy if:

- The Insured becomes totally disabled while this rider is in force prior to the Rider Annual Date next following his/her 60th birthday;
- The Insured remains totally disabled until the Conversion Date; and
- Premiums for this rider are being waived under a Waiver of Premium Benefit Rider on the Conversion Date.

The following rules will apply to the new whole life policy:

- The basic amount of insurance for the new whole life policy will be the same as the amount of insurance for this rider shown on page 3 of the policy.
- The plan for the new policy will be a whole life policy that we have for this purpose.
- The date of issue for the new whole life policy will be the Conversion Date.
- A Waiver of Premium Benefit Rider will be added to the new whole life policy. Subject to the terms and conditions of that new Waiver of Premium Benefit Rider, premiums will continue to be waived under the new whole life policy provided that total disability, as defined therein, continues.

Between Ages 60 and 65 – We will also automatically convert this rider to a new whole life policy if:

- The Insured becomes totally disabled while this rider is in force between the annual dates next following the Insured's 60th birthday and 65th birthday;
- The Insured remains totally disabled until the Conversion Date; and
- Premiums for this rider are being waived under a Waiver of Premium Benefit Rider on the Conversion Date.

The above rules will also apply to the new whole life policy, except for the last rule regarding waiver, which will not apply.

- If the Conversion Date occurs before the annual date next following the Insured's 65th birthday, the Waiver of Premium Benefit Rider under which premiums for this rider are being waived will be attached to the new whole life policy. Premiums for the new whole life policy will be waived only while the Insured is totally disabled until the annual date next following the Insured's 65th birthday.
- If the Conversion Date occurs on the annual date next following the Insured's 65th birthday, no Waiver of Premium Benefit Rider will be added to the new whole life policy and no premiums will be waived under the new whole life policy.

After Age 65 – If the Insured becomes totally disabled while this rider is in force after the annual date next following the Insured's 65th birthday, no premium will be waived under a Waiver of Premium Benefit Rider and there will not be any automatic conversion to a new whole life policy.

COMMON NEW POLICY RULES

The following rules, applicable to conversion that you elect to a new permanent life policy and to automatic conversion to a new whole life policy, will also apply:

- Premiums for the new policy will be at the rates charged for it at the Insured's age on the new policy's date of issue.
- Premiums for the new policy will be at the premium class that is the nearest available equivalent class to the Insured's premium class under this rider. If this rider was issued at a preferred premium class rating and there is no equivalent preferred class rating for the new policy, the new policy will be issued at standard premium rates.
- The new policy will take effect on its date of issue. This rider will end when the new policy takes effect.

GENERAL PROVISIONS

RELIANCE

We have issued this rider in reliance on the statements made in the application for this rider. These statements are representations and not warranties. No statement will cause this rider to be rescinded, or will be used in defense of a claim, unless contained in the written application for this rider. Read the copies of the application for this rider. If any statement is not true or complete, you must tell us.

INCONTESTABILITY

We may not contest this rider after it has been in force during the lifetime of the Insured for two years from the Effective Date of this Rider, except for nonpayment of a needed premium or fraud. While this rider is contestable, we cannot rescind this rider or deny a claim unless:

- an answer in the application for this rider was not true or complete; and
- if we had known the truth, we would have:
 - (a) declined the application for this rider;
 - (b) issued this rider at a higher premium; or
 - (c) issued this rider on some other basis.

If we rescind this rider, the premiums you have paid will be refunded.

SUICIDE EXCLUSION

If the Insured commits suicide (while sane or insane) within two years of the Effective Date of this Rider, our sole obligation will be to pay to the Beneficiary the premiums you have paid for this rider.

MISSTATEMENT OF AGE OR SEX

Age in this rider means the age as of the Insured's last birthday before the Effective Date of this Rider. If the Insured's age or sex has been misstated, we will adjust all benefits to the amount which the premiums paid for

this rider would have purchased at the correct age and sex.

POLICY PROVISIONS

This rider when shown on page 3 of the policy is part of the policy to which it is attached. All provisions of the policy, except dividends, will apply to this rider unless otherwise noted herein. This rider is nonparticipating.

TERMINATION

This rider will terminate on the earliest of:

- the date this rider is converted to a new policy;

- the date the policy to which this rider is attached becomes Extended Term Insurance or Paid-Up Insurance;
- the termination of the policy to which this rider is attached;
- when a premium for this rider has not been received on or before its required due date;
- the date that you request it be terminated by written notice to us; or
- the Premium Expiration Date shown for this rider on Page 3 of the policy.

Signed at Lafayette, Indiana as of the Effective Date of this rider.



Secretary



President & CEO

The Lafayette Life Insurance Company

Term Life Insurance Rider

IN THIS RIDER

Terms used in this rider shall have the same meanings as are set forth in the policy to which this rider is attached unless otherwise defined in this rider.

DEFINITIONS

The following terms used in this rider have the following meanings:

CONVERSION DATE is the date shown immediately next to the phrase **CONVERSION DATE** on page 4M of the policy. The Conversion Date is the earlier of: the Initial Term Expiration Date, or the Rider Annual Date next following the Insured's 65th birthday.

EFFECTIVE DATE OF THIS RIDER is the Effective Date shown for this rider on page 3 of the policy.

INITIAL TERM is the period of years shown immediately next to the phrase **INITIAL TERM** on page 4M of the policy. The Initial Term commences on the Effective Date of this Rider and expires on the Initial Term Expiration Date. Once the rider has been issued, the Initial Term cannot be changed.

INITIAL TERM EXPIRATION DATE is the date shown immediately next to the phrase **INITIAL TERM EXPIRATION DATE** on page 4M of the policy.

RENEWAL DATES are Rider Annual Dates that begin on expiration of the Initial Term. The first Renewal Date and the Initial Term Expiration Date are the same date. The last Renewal Date is one year before the Premium Expiration Date shown for this rider on page 3 of the policy.

RIDER ANNUAL DATE means the same month and day each year as this rider's Effective Date shown on page 3 of the policy.

THE BENEFIT

Subject to the terms of this rider, we will pay to the beneficiary the amount of this rider shown on page 3 of the policy. We will pay the beneficiary this amount as soon as practicable after we receive due proof that the Insured has died while this rider is in force. We will pay this amount to the same beneficiary entitled to receive the Basic Amount shown on page 3 of the policy, and in the same manner as the Basic Amount is paid.

PREMIUMS

DURING THE INITIAL TERM

During the Initial Term, premiums for this rider are level. Premiums for this rider during the Initial Term are shown under Annual Premium on page 3 of the policy.

ON EACH RENEWAL DATE

On each Renewal Date, this rider may be renewed for a one-year term at an increased rate. The renewal premiums for this rider are shown for each one-year term under Renewal Premium on page 4M of the policy.

RENEWAL WITHOUT EVIDENCE

If all due premiums have been timely paid to a Renewal Date, this rider may be renewed without evidence of insurability.

CONVERSION

Subject to the terms and conditions as set forth in this rider, this rider may be converted to a new permanent life policy on the life of the Insured. Conversion must occur on or before the Conversion Date.

CONVERSION YOU ELECT

You may convert this rider to a new permanent life policy on or before the Conversion Date, if all due premiums for this rider have been paid and are not being waived. Evidence of insurability will not be required. We must receive at our Home Office your written application, and the first premium, for the new policy before we will issue it. The following rules for the new permanent life policy will apply:

- The basic amount of insurance for the new permanent life policy may not be less than the minimum that we require for it nor more than the amount of insurance for this rider shown on page 3 of the policy.
- The plan for the new policy may be any permanent life policy that we would then issue. The only exceptions are preferred risk policies and policies with term insurance or increasing insurance.
- The contestable and suicide periods for the new permanent life policy will start from this rider's Effective Date.
- The date of issue for the new permanent life policy will be the date your application is approved.
- A waiver of premium rider or a waiver of monthly deduction rider, as applicable, may be added to the new permanent life policy subject to our approval. We may require evidence of insurability to include the applicable waiver rider with the new permanent life policy.

AUTOMATIC CONVERSION BY US

Prior to Age 60 – We will automatically convert this rider to a new whole life policy if:

- The Insured becomes totally disabled while this rider is in force prior to the Rider Annual Date next following his/her 60th birthday;
- The Insured remains totally disabled until the Conversion Date; and
- Premiums for this rider are being waived under a Waiver of Premium Benefit Rider on the Conversion Date.

The following rules will apply to the new whole life policy:

- The basic amount of insurance for the new whole life policy will be the same as the amount of insurance for this rider shown on page 3 of the policy.
- The plan for the new policy will be a whole life policy that we have for this purpose.
- The date of issue for the new whole life policy will be the Conversion Date.
- A Waiver of Premium Benefit Rider will be added to the new whole life policy. Subject to the terms and conditions of that new Waiver of Premium Benefit Rider, premiums will continue to be waived under the new whole life policy provided that total disability, as defined therein, continues.

Between Ages 60 and 65 – We will also automatically convert this rider to a new whole life policy if:

- The Insured becomes totally disabled while this rider is in force between the annual dates next following the Insured's 60th birthday and 65th birthday;
- The Insured remains totally disabled until the Conversion Date; and
- Premiums for this rider are being waived under a Waiver of Premium Benefit Rider on the Conversion Date.

The above rules will also apply to the new whole life policy, except for the last rule regarding waiver, which will not apply.

- If the Conversion Date occurs before the annual date next following the Insured's 65th birthday, the Waiver of Premium Benefit Rider under which premiums for this rider are being waived will be attached to the new whole life policy. Premiums for the new whole life policy will be waived only while the Insured is totally disabled until the annual date next following the Insured's 65th birthday.
- If the Conversion Date occurs on the annual date next following the Insured's 65th birthday, no Waiver of Premium Benefit Rider will be added to the new whole life policy and no premiums will be waived under the new whole life policy.

After Age 65 – If the Insured becomes totally disabled while this rider is in force after the annual date next following the Insured's 65th birthday, no premium will be waived under a Waiver of Premium Benefit Rider and there will not be any automatic conversion to a new whole life policy.

COMMON NEW POLICY RULES

The following rules, applicable to conversion that you elect to a new permanent life policy and to automatic conversion to a new whole life policy, will also apply:

- Premiums for the new policy will be at the rates charged for it at the Insured's age on the new policy's date of issue.
- Premiums for the new policy will be at the premium class that is the nearest available equivalent class to the Insured's premium class under this rider. If this rider was issued at a preferred premium class rating and there is no equivalent preferred class rating for the new policy, the new policy will be issued at standard premium rates.
- The new policy will take effect on its date of issue. This rider will end when the new policy takes effect.

GENERAL PROVISIONS

RELIANCE

We have issued this rider in reliance on the statements made in the application for this rider. These statements are representations and not warranties. No statement will cause this rider to be rescinded, or will be used in defense of a claim, unless contained in the written application for this rider. Read the copies of the application for this rider. If any statement is not true or complete, you must tell us.

INCONTESTABILITY

We may not contest this rider after it has been in force during the lifetime of the Insured for two years from the Effective Date of this Rider, except for nonpayment of a needed premium or fraud. While this rider is contestable, we cannot rescind this rider or deny a claim unless:

- an answer in the application for this rider was not true or complete; and
- if we had known the truth, we would have:
 - (a) declined the application for this rider;
 - (b) issued this rider at a higher premium; or
 - (c) issued this rider on some other basis.

If we rescind this rider, the premiums you have paid will be refunded.

SUICIDE EXCLUSION

If the Insured commits suicide (while sane or insane) within two years of the Effective Date of this Rider, our sole obligation will be to pay to the Beneficiary the premiums you have paid for this rider.

MISSTATEMENT OF AGE

Age in this rider means the age as of the Insured's last birthday before the Effective Date of this Rider. If the Insured's age has been misstated, we will adjust all benefits to the amount which the premiums paid for this

rider would have purchased at the correct age.

POLICY PROVISIONS

This rider when shown on page 3 of the policy is part of the policy to which it is attached. All provisions of the policy, except dividends, will apply to this rider unless otherwise noted herein. This rider is nonparticipating.

TERMINATION

This rider will terminate on the earliest of:

- the date this rider is converted to a new policy;

- the date the policy to which this rider is attached becomes Extended Term Insurance or Paid-Up Insurance;
- the termination of the policy to which this rider is attached;
- when a premium for this rider has not been received on or before its required due date;
- the date that you request it be terminated by written notice to us; or
- the Premium Expiration Date shown for this rider on Page 3 of the policy.

Signed at Lafayette, Indiana as of the Effective Date of this rider.



Secretary



President & CEO

POLICY SCHEDULE

Initial Term: {10} Years

Initial Term Expiration Date: {1/01/19}

Conversion Date: {1/01/19}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{11}	{45}	{1/01/19}	{244.00}				
{12}	{46}	{1/01/20}	{267.00}				
{13}	{47}	{1/01/21}	{286.00}				
{14}	{48}	{1/01/22}	{301.00}				
{15}	{49}	{1/01/23}	{320.00}				
{16}	{50}	{1/01/24}	{345.00}				
{17}	{51}	{1/01/25}	{377.00}				
{18}	{52}	{1/01/26}	{416.00}				
{19}	{53}	{1/01/27}	{461.00}				
{20}	{54}	{1/01/28}	{518.00}				
{21}	{55}	{1/01/29}	{582.00}				
{22}	{56}	{1/01/30}	{648.00}				
{23}	{57}	{1/01/31}	{712.00}				
{24}	{58}	{1/01/32}	{776.00}				
{25}	{59}	{1/01/33}	{851.00}				
{26}	{60}	{1/01/34}	{942.00}				
{27}	{61}	{1/01/35}	{1,053.00}				
{28}	{62}	{1/01/36}	{1,182.00}				
{29}	{63}	{1/01/37}	{1,323.00}				
{30}	{64}	{1/01/38}	{1,470.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

POLICY SCHEDULE

Initial Term: {20} Years

Initial Term Expiration Date: {1/01/29}

Conversion Date: {1/01/29}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{21}	{55}	{1/01/29}	{582.00}				
{22}	{56}	{1/01/30}	{648.00}				
{23}	{57}	{1/01/31}	{712.00}				
{24}	{58}	{1/01/32}	{776.00}				
{25}	{59}	{1/01/33}	{851.00}				
{26}	{60}	{1/01/34}	{942.00}				
{27}	{61}	{1/01/35}	{1,053.00}				
{28}	{62}	{1/01/36}	{1,182.00}				
{29}	{63}	{1/01/37}	{1,323.00}				
{30}	{64}	{1/01/38}	{1,470.00}				
{31}	{65}	{1/01/39}	{1,623.00}				
{32}	{66}	{1/01/40}	{1,778.00}				
{33}	{67}	{1/01/41}	{1,940.00}				
{34}	{68}	{1/01/42}	{2,111.00}				
{35}	{69}	{1/01/43}	{2,303.00}				
{36}	{70}	{1/01/44}	{2,527.00}				
{37}	{71}	{1/01/45}	{2,799.00}				
{38}	{72}	{1/01/46}	{3,117.00}				
{39}	{73}	{1/01/47}	{3,452.00}				
{40}	{74}	{1/01/48}	{3,812.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

POLICY SCHEDULE

Initial Term: {30} Years

Initial Term Expiration Date: {1/01/39}

Conversion Date: {1/01/39}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{31}	{65}	{1/01/39}	{1,623.00}				
{32}	{66}	{1/01/40}	{1,778.00}				
{33}	{67}	{1/01/41}	{1,940.00}				
{34}	{68}	{1/01/42}	{2,111.00}				
{35}	{69}	{1/01/43}	{2,303.00}				
{36}	{70}	{1/01/44}	{2,527.00}				
{37}	{71}	{1/01/45}	{2,799.00}				
{38}	{72}	{1/01/46}	{3,117.00}				
{39}	{73}	{1/01/47}	{3,452.00}				
{40}	{74}	{1/01/48}	{3,812.00}				
{41}	{75}	{1/01/49}	{4,204.00}				
{42}	{76}	{1/01/50}	{4,646.00}				
{43}	{77}	{1/01/51}	{5,160.00}				
{44}	{78}	{1/01/52}	{5,757.00}				
{45}	{79}	{1/01/53}	{6,426.00}				
{46}	{80}	{1/01/54}	{7,172.00}				
{47}	{81}	{1/01/55}	{7,983.00}				
{48}	{82}	{1/01/56}	{8,842.00}				
{49}	{83}	{1/01/57}	{9,780.00}				
{50}	{84}	{1/01/58}	{10,823.00}				
{51}	{85}	{1/01/59}	{11,983.00}				
{52}	{86}	{1/01/60}	{13,259.00}				
{53}	{87}	{1/01/61}	{14,638.00}				
{54}	{88}	{1/01/62}	{16,104.00}				
{55}	{89}	{1/01/63}	{17,642.00}				
{56}	{90}	{1/01/64}	{19,174.00}				
{57}	{91}	{1/01/65}	{20,682.00}				
{58}	{92}	{1/01/66}	{22,262.00}				
{59}	{93}	{1/01/67}	{23,928.00}				
{60}	{94}	{1/01/68}	{25,683.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

POLICY SCHEDULE

Initial Term: {10} Years

Initial Term Expiration Date: {1/01/19}

Conversion Date: {1/01/19}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{11}	{45}	{1/01/19}	{231.00}				
{12}	{46}	{1/01/20}	{253.00}				
{13}	{47}	{1/01/21}	{272.00}				
{14}	{48}	{1/01/22}	{289.00}				
{15}	{49}	{1/01/23}	{310.00}				
{16}	{50}	{1/01/24}	{336.00}				
{17}	{51}	{1/01/25}	{368.00}				
{18}	{52}	{1/01/26}	{406.00}				
{19}	{53}	{1/01/27}	{450.00}				
{20}	{54}	{1/01/28}	{504.00}				
{21}	{55}	{1/01/29}	{564.00}				
{22}	{56}	{1/01/30}	{627.00}				
{23}	{57}	{1/01/31}	{689.00}				
{24}	{58}	{1/01/32}	{751.00}				
{25}	{59}	{1/01/33}	{822.00}				
{26}	{60}	{1/01/34}	{907.00}				
{27}	{61}	{1/01/35}	{1,009.00}				
{28}	{62}	{1/01/36}	{1,127.00}				
{29}	{63}	{1/01/37}	{1,254.00}				
{30}	{64}	{1/01/38}	{1,388.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

POLICY SCHEDULE

Initial Term: {20} Years

Initial Term Expiration Date: {1/01/29}

Conversion Date: {1/01/29}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{21}	{55}	{1/01/29}	{564.00}				
{22}	{56}	{1/01/30}	{627.00}				
{23}	{57}	{1/01/31}	{689.00}				
{24}	{58}	{1/01/32}	{751.00}				
{25}	{59}	{1/01/33}	{822.00}				
{26}	{60}	{1/01/34}	{907.00}				
{27}	{61}	{1/01/35}	{1,009.00}				
{28}	{62}	{1/01/36}	{1,127.00}				
{29}	{63}	{1/01/37}	{1,254.00}				
{30}	{64}	{1/01/38}	{1,388.00}				
{31}	{65}	{1/01/39}	{1,527.00}				
{32}	{66}	{1/01/40}	{1,670.00}				
{33}	{67}	{1/01/41}	{1,821.00}				
{34}	{68}	{1/01/42}	{1,981.00}				
{35}	{69}	{1/01/43}	{2,159.00}				
{36}	{70}	{1/01/44}	{2,366.00}				
{37}	{71}	{1/01/45}	{2,616.00}				
{38}	{72}	{1/01/46}	{2,905.00}				
{39}	{73}	{1/01/47}	{3,211.00}				
{40}	{74}	{1/01/48}	{3,539.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

POLICY SCHEDULE

Initial Term: {30} Years

Initial Term Expiration Date: {1/01/39}

Conversion Date: {1/01/39}

Renewal Table for Term Life Insurance Rider

Increased Premiums upon Renewal *

Rider Year	Attained Age **	Renewal Date	Renewal Premium	Rider Year	Attained Age **	Renewal Date	Renewal Premium
{31}	{65}	{1/01/39}	{1,527.00}				
{32}	{66}	{1/01/40}	{1,670.00}				
{33}	{67}	{1/01/41}	{1,821.00}				
{34}	{68}	{1/01/42}	{1,981.00}				
{35}	{69}	{1/01/43}	{2,159.00}				
{36}	{70}	{1/01/44}	{2,366.00}				
{37}	{71}	{1/01/45}	{2,616.00}				
{38}	{72}	{1/01/46}	{2,905.00}				
{39}	{73}	{1/01/47}	{3,211.00}				
{40}	{74}	{1/01/48}	{3,539.00}				
{41}	{75}	{1/01/49}	{3,896.00}				
{42}	{76}	{1/01/50}	{4,297.00}				
{43}	{77}	{1/01/51}	{4,759.00}				
{44}	{78}	{1/01/52}	{5,289.00}				
{45}	{79}	{1/01/53}	{5,879.00}				
{46}	{80}	{1/01/54}	{6,544.00}				
{47}	{81}	{1/01/55}	{7,278.00}				
{48}	{82}	{1/01/56}	{8,051.00}				
{49}	{83}	{1/01/57}	{8,886.00}				
{50}	{84}	{1/01/58}	{9,808.00}				
{51}	{85}	{1/01/59}	{10,809.00}				
{52}	{86}	{1/01/60}	{11,914.00}				
{53}	{87}	{1/01/61}	{13,132.00}				
{54}	{88}	{1/01/62}	{14,411.00}				
{55}	{89}	{1/01/63}	{15,719.00}				
{56}	{90}	{1/01/64}	{16,905.00}				
{57}	{91}	{1/01/65}	{18,021.00}				
{58}	{92}	{1/01/66}	{19,310.00}				
{59}	{93}	{1/01/67}	{20,793.00}				
{60}	{94}	{1/01/68}	{22,490.00}				

* On each Renewal Date you may renew this rider for a one-year term at an increased rate. Premiums shown are annual premiums. Premiums may be paid more frequently. Semiannual will be 51% of the annual. Quarterly will be 26% of the annual. Monthly (preauthorized withdrawal) will be 8.5% of the annual.

** Attained age is as of the beginning of the rider year. It is the Insured's age on the Renewal Date shown.

SERFF Tracking Number: LAF-125756368

State: Arkansas

Filing Company: The Lafayette Life Insurance Company

State Tracking Number: 39806

Company Tracking Number:

TOI: L041 Individual Life - Term

Sub-TOI: L041.213 Specified Age or Duration -

Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08

Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: LAFA-125756368

State: Arkansas

Filing Company: The Lafayette Life Insurance Company

State Tracking Number: 39806

Company Tracking Number:

TOI: L04I Individual Life - Term

Sub-TOI: L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life

Product Name: TLR-08

Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Certification/Notice	Review Status:	07/31/2008
Comments:		
Attachment: CERTIFICATION.pdf		
Satisfied -Name: Application	Review Status:	07/31/2008
Comments:		
Attachment: 1459-E-AR.pdf		
Satisfied -Name: Life & Annuity - Acturial Memo	Review Status:	07/31/2008
Comments:		
Attachment: TLR-08 ActMem.pdf		
Satisfied -Name: Cover Letter	Review Status:	07/31/2008
Comments:		
Attachment: Submission Letter.pdf		
Satisfied -Name: Example Policy Schedule Pages	Review Status:	07/31/2008
Comments:		
Attachment: WL-05-95 Page 3's All One Doc.pdf		

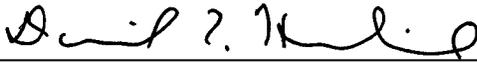
CERTIFICATION

The Lafayette Life Insurance Company, by its undersigned officer, hereby certifies:

1. This submission meets the provisions of Rule and Regulation 19, as well as applicable requirements of the Arkansas Insurance Department;
2. It is in compliance with Regulation 49;
3. It is in compliance with ACA 23-79-138; and
4. The following forms have the following readability scores as calculated by the Flesch Reading Ease Test and that these forms meet the reading ease requirements of your state laws and regulations.

Form Number	Form Name	Flesch Score
TLR-08	Policy	54
TLR-08U	Policy	54

The Lafayette Life Insurance Company



Daniel E. Haneline, Actuary

Date: July 31, 2008

THE LAFAYETTE LIFE INSURANCE COMPANY

1905 Teal Road, P.O. Box 7007, Lafayette, Indiana 47903, Phone: 800-243-6631 Fax: 888-558-9329

APPLICATION FOR LIFE INSURANCE, Type: () Individual () Pension () Tax Sheltered

Part 1: Section I: Proposed Insured

Name: Street Address: City: State: Zip Code: Birth Date: Birth State: Age: Sex: Marital Status: Height / Weight: Social Security Number: Home Phone Number: E-mail Address: Occupation: Duties: Business Name and Address: Business Phone: Annual Income: \$

Section II: Others Proposed for Insurance (Spouse / Payor Name / SPO - Designated Person / Child(ren))

Table with columns: Spouse / Payor / SPO Full Name, Sex, Birth Date, Birth State, Age, Insurance in Force, Height / Weight, Occupation / Duties, Employer Name & Address, Years Employed. Includes rows for Child(ren) with columns: Full Name, Sex, Birth Date, Birth State, Age, Height / Weight, Insurance in Force.

Section III: Plan / Riders / Benefits / Amount of Insurance

Base Plan

Base Plan (using Reference Manual wording) Amount of Insurance \$

Death Benefit for Universal Life ONLY () Increasing () Level

{EIUL-98 ONLY: % Index % Fixed (Total must equal 100%)}

IUL-07: % A: Annual Point to Point % B: Monthly Average % Fixed (Total must equal 100%)

Insurance Riders / Benefits

(Indicate Type of Term Rider) \$ () LPUA \$ () SPUA \$

() FPUA \$ () Long Term Care Rider (LTC Rider Packet needed) () SIR \$

() CIR \$ () SPO \$ () \$

() ADB \$ () GPO / GIO \$ () Payor Benefit with Waiver of Premium

() COLA (UL ONLY except IUL-07) () Waiver of Premium (for Whole Life & IUL-07) () Waiver of Monthly Deduction (UL ONLY)

Dividend Options: Plan's automatic Option will be used unless otherwise indicated:

Premium Billing: Billed Premium Amount \$ Premium Billing Frequency (indicate frequency)

Life Insurance in Force or Application Pending on Proposed Insured:

Table with columns: Company, Amount, Year Issued, Accidental Death

Existing Policies: Do you have any existing individual life insurance policies and/or annuity contracts in force? () Yes () No

If yes, total amount of existing insurance inforce \$

Replacement: Is the policy applied for intended to replace, in whole or in part, any existing life insurance or annuity?

() Yes () No If Yes, list Company:

Automatic Premium Loan Provision:

Automatic Premium Loan Provision will be in effect, if available, unless "No" is selected. () No

(under a Pension Plan, the non-forfeiture option will be reduced paid-up)

Section IV: Proposed Owner (if blank, Proposed Insured is Owner)

Primary Owner: Individual or Company or Pension Plan (Trustee Of Plan)

Street Address: City, State: Zip Code:

SSN / Tax ID: Relationship to Insured: Owner's Age:

Contingent Owner: (if blank, Proposed Insured is Contingent Owner)

Street Address: City, State: Zip Code:

SSN/ Tax ID: Relationship to Insured: Owner's Age:

Section V: Beneficiary (Pension / Profit Sharing Plans: Beneficiary will be Trustee of the Plan named in Section IV above)

Primary Beneficiary	Relationship to Insured	Date of Birth
Contingent Beneficiary	Relationship to Insured	Date of Birth

Part 2: Medical Questions (Guaranteed Issue Questions 1-4, Simplified Issue and Regular Underwriting Questions 1-9)	Insured		Spouse		Child		SPO/ Payor	
	Yes	No	Yes	No	Yes	No	Yes	No
1. Have you or any other person proposed for insurance in the past five (5) years: a. flown as a pilot, student pilot, or crew member, or is such flying contemplated? (If yes, complete Aviation Questionnaire)								
b. engaged in racing, scuba diving, hang gliding, sky diving, mountain or rock climbing or other hazardous sport or avocation? (If yes, complete applicable questionnaire)								
c. had a drivers license revoked or suspended, had three (3) or more moving violations or accidents, or been convicted for driving under the influence of alcohol or drugs? (If yes, give details, state and license number)								
d. been arrested or convicted for any criminal offense, or are you currently on parole or probation?								
2. Are you or any other person proposed for insurance a current member of any Armed Forces, National Guard or Reserve Unit? (If yes, complete Military Questionnaire)								
3. Are all persons proposed for insurance United States Citizens? (If no, complete Citizenship Questionnaire)								
4. Have you or anyone else proposed for insurance used any form of tobacco in the past three (3) years? (Tobacco includes: cigarettes, cigars, pipe, smokeless, nicotine gum, patch, nasal spray, etc.) If yes, when and what types? Types: _____ Last used (dd/mm/yy): _____								
5. Have you or anyone else proposed for insurance in the past ten (10) years been diagnosed, treated by or consulted with a medical professional for: a. diabetes, cancer, tumors, high blood pressure, heart disease or heart disorder, circulatory system disorder, disorder of brain, mental or nervous disorder, skin disease, arthritis, connective tissue disease, asthma, chronic obstructive pulmonary disease, disorder of the blood, bladder, intestines, kidneys, liver, lungs, pancreas, stomach or reproductive organs?								
b. an Immune Deficiency Disorder, AIDS or AIDS Related Complex (ARC)?								
6. Have you or anyone else proposed for insurance received medical or surgical treatment or advice from a medical professional for any condition not listed in (5a) in the past five (5) years, including a routine examination?								
7. Have you or any other person proposed for insurance in the past ten (10) years used drugs illegally or been advised by a medical professional to seek or have you been treated for alcohol or drug abuse? (If yes, complete Alcohol / Drug Questionnaire)								
8. Is anyone proposed for insurance now under treatment, observation or taking any medication?								
9. Personal Physician: _____ Address: _____ Telephone Number: _____ Fax #: _____								

Details of "Yes" answers in Questions 1-8:

Medical Authorization: I (We) **Authorize** any licensed physician, medical professional or health care provider, hospital, clinic, health care facility or other medical care institution, the Veterans Administration or other institutional source, insurance or reinsuring company, the Medical Information Bureau, Inc., insurance support organization or consumer reporting agency, or employer having information available as to diagnosis, treatment and prognosis with respect to any physical or mental condition and/or treatment of me (us) or my (our) minor child(ren) and any other personal or non-medical information of me (us) or my (our) minor child(ren), to give to The Lafayette Life Insurance Company, its legal representative(s), or any consumer reporting agency employed by the Company, any and all such information. I (We) **Understand** the purpose of the authorization is to allow The Lafayette Life Insurance Company to determine eligibility for life insurance or a claim for benefits under a life policy. Any information obtained will not be released by the Company to any persons or organizations **Except** to the Company's reinsurers, the Medical Information Bureau, Inc., or other persons or organizations performing business or legal services for the Company in connection with my (our) application or claim. No other release of information may be made except as may be allowed by law or as I (we) may further authorize. I (We) **Know** that I (we) and my (our) authorized representative may receive a copy of this Authorization by requesting it from the Company. I (We) **Acknowledge** receipt of the Insurance Information Practices, which includes the Medical Information Bureau Pre-Notice and the Fair Credit Reporting Act Notice. I (We) **Agree** that a photocopy of this Authorization shall be as valid as the original and that this Authorization will be valid from the date signed below for a period of twenty-four (24) full months, or less if required by applicable state law. I (We) elect to be interviewed if an investigative consumer report is prepared in connection with the application for insurance.

Applicant Statement: I (We) **Agree:** a) that this Application (Part 1, pages 1, 2 and 3; Part 2, if required; and any Supplement to the Application) shall form a part of any Policy issued and constitute the basis for its issue; b) that no agent of Lafayette Life has the authority to approve a policy or waive the provisions of a policy except an officer of the Company; c) changes or corrections made by the Company, if any, will be ratified by my (our) acceptance of the Policy unless written consent is required; and d) **Except as stated in a conditional receipt completed by the company's agent, Lafayette Life grants no insurance under this application unless and until, during the continued insurability of all persons proposed for insurance as stated in the application, the applied-for policy is issued, delivered to the applicant and the first premium therefore is paid.**

I acknowledge that I have received and read the below fraud notice.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

I (We) have read the above questions and answers and declare that they are complete and true to the best of my (our) knowledge and belief.

\$ _____
(Must Always Be Answered) has been paid to the agent named below. This payment can in no way obligate The Lafayette Life Insurance Company unless and until all terms or conditions of the corresponding conditional receipt are met.

Signed at _____ State of _____ this _____ day of _____ year _____

Signature of Proposed Insured Age 15 & Up

Signature of Proposed Insured Spouse/SPO/Payor

Signature of Parent (Juvenile Policy Only)

Signature of Individual Owner, Trustee or Authorized Officer if Corporate Owner - Authorized Officer must be one of the following:
circle one: President/Vice President General Manager Secretary/Treasurer Owner Partner Chairperson

Agent Statement: Does the applicant have any existing individual life insurance policies and/or annuity contracts in force to the best of your knowledge? (Yes ___) (No ___) The insurance applied for (will ___) (will not ___) replace any existing life insurance or annuity. The information contained in this application is true and accurate to the best of my knowledge. I have delivered to the proposed insured the Insurance Information Practices which includes the Medical Information Bureau Pre-Notice and the Fair Credit Reporting Act Notice.

Witness _____
Signature of Agent

Agent State License # _____ Agent's Name _____
(if required) Please Print

The Lafayette Life Insurance Company

ACTUARIAL MEMORANDUM

Term Life Insurance Rider

Rider Forms: TLR-08, TLR-08U

I. Description of Policy Characteristics

This is a term life rider. It provides non-participating convertible term insurance coverage using guaranteed premium rates. The rates are level for an Initial Term and become attained age YRT rates thereafter. Premiums are payable to the premium expiration date of the rider and coverage terminates without value at that time.

A. Initial Terms

The Initial Term is a period of years that commences on the Date of Issue and continues until the Initial Term Expiration Date. Premiums are level during the Initial Term. There are three Initial Term periods:

- 10 Years
- 20 Years
- 30 Years

B. Renewal Dates

Renewal Dates are annual dates that begin on expiration of the Initial Term, and continue until the premium expiration date of the rider. Premium expiration dates for the rider vary by Initial Term period:

- 10 Years: Age 65, or 20 years if longer
- 20 Years: Age 75, or 30 years if longer
- 30 Years: Age 95

An attained age YRT premium is payable on each Renewal Date at an increased rate.

C. Issue Age Ranges

Issue age ranges vary by Initial Term period:

- 10 Years: 18-75
- 20 Years: 18-65
- 30 Years: 18-50, for male smoker and unisex smoker
18-55, for other underwriting classes

D. Sex

For some applications we need unisex, as well as male and female, as a rating class:

- Male
- Female
- Unisex

E. Underwriting Classes

- Preferred
- Nonsmoker
- Smoker

F. Policy Fee

Not applicable

G. Conversion

This policy may be converted to a permanent life plan during the Initial Term (but not beyond age 65).

II. Basis of Values

A. Attained Age YRT Premiums Payable on a Renewal Date

Two times the mortality rate from the 2001 CSO, ALB Mortality Table

B. Nonforfeiture Demonstration

2001 CSO, ALB Mortality Table and 5% Interest

C. Reserves

2001 CSO, ALB Mortality Table and 4% Interest

III. Nonforfeiture Demonstration

No cash values are required for this policy because, for each age at which the rider will be issued, the minimum SNFL cash values for every rider year are less than 2.5% of the amount of insurance in force at the beginning of the rider year.

A. Formulas

Age and years notation

- x = age last birthday as of the date of issue
- t = number of years the rider has been in force since issue
- n = premium paying years (for both level and attained age YRT premiums)
 - = to age 65, or 20 years if longer (10 year Initial Term)
 - = to age 75, or 30 years if longer (20 year Initial Term)
 - = to age 95 (30 year Initial Term)

Present value at time t of future gross premiums

$$PVP_{x+t:n-t}] = \left[\sum_{s=t}^{n-1} (D_{x+s} \times {}_{s+1}GP_x) \right] \div D_{x+t} \quad \text{for } t = 0, \dots, n-1$$

where ${}_{s+1}GP_x$ = gross premium for rider year s+1

Present value at issue of an annuity of 1 per year

$$PVA_x = (N_x - N_{x+n}) \div D_x$$

Present value at time t of future benefits

$$PVB_{x+t:n-t}] = 1000 \times (M_{x+t} - M_{x+n}) \div D_{x+t} \quad \text{for } t = 0, \dots, n-1$$

Nonforfeiture net level premium

$$PNL_x = PVB_{x:n}] \div PVA_x$$

Expense allowance

$$EA_x = [1.25 \times \text{Min}(PNL_x ; 40)] + 10$$

Ratio of future benefits and expense allowance to future gross premiums

$$K_x = (PVB_{x:n}] + EA_x) \div PVP_{x:n}]$$

Minimum SNFL cash value at time t

$${}_tNFV_x = (PVB_{x+t:n-t}] - K_x \times PVP_{x+t:n-t}]$$

B. Tests

Tests were made using the level premiums payable during the Initial Term and the attained age YRT premiums payable on each Renewal Date.

Tests were made at all desired issue ages for each combination of plan, sex and underwriting class.

Desired issue age ranges were generally 18-75, 18-65 and 18-55 for the 10, 20, and 30 year Initial Term periods, respectively. The tests showed that, in order to avoid a cash value requirement, it would be necessary, for the 30 year plan, to limit the issue age range to 18-50 for the male smoker and unisex smoker underwriting classes.

With these restricted issue age ranges, the minimum SNFL cash value required for every rider year for any age at which we will issue the policy is less than 2.5% of the amount of insurance in force at the beginning of the rider year.

C. Numerical SNFL Example

A numerical SNFL example is included for an issue under the 10 year plan to a male age 35, nonsmoker. The male nonsmoker commutation functions that were used for this numerical example are also provided.

IV. Reserves

Reserves for this rider will be calculated by the Commissioners Reserve Valuation Method. They are based on the Valuation of Life Insurance Policies Model Regulation. The reserves satisfy the minimum reserves required by such law.

The basic reserve is equal to the greater of the reserves calculated by the unitary method or the segmented method.

A. Unitary Reserves

Let,

b_t = death benefit for rider year t

G_t = gross premium for rider year $t+1$

${}_{19}P_{x+1}$ = 19-pay whole life premium at age $x+1$

Equivalent Level Renewal Amount

$$\text{ELRA} = \left[\sum_{j=1}^{n-1} C_{x+j} \times b_{j+1} \right] \div \sum_{j=1}^{n-1} C_{x+j}$$

Present value of future gross premiums at age x

$$\text{PVFP}_x = \left[\sum_{j=0}^{n-1} D_{x+j} \times G_j \right] \div D_x$$

Present value, at the date of issue, of an annuity of one per year payable on the first and each subsequent anniversary of the rider on which a premium falls due

$${}_{1|}\text{PVA}_x = \left[N_{x+1} - N_{x+n} \right] \div D_x$$

Present value of future benefits at age x

$$\text{PVFB}_x = \left[\sum_{j=0}^{n-1} C_{x+j} \times b_{j+1} \right] \div D_x$$

Present value, at the date of issue, of the benefit for the first rider year

$$c_x = \left[C_x \times b_1 \right] \div D_x$$

Expense allowance

$$\begin{aligned}
 EA &= \text{Max} \{ 0 ; \text{Min} [(a) \text{ and } (b)] \} \\
 (a) &= \left[(PVFB_x - c_x) \div {}_1|PVA_x \right] - c_x \\
 (b) &= (ELRA \times {}_{19}P_{x+1}) - c_x
 \end{aligned}$$

Valuation net premium as a percentage of gross premium

$$B = (PVFB_x + EA) \div PVFP_x$$

Valuation net premium for rider year t+1

From the definition of B we have: $EA = (B \times PVFP_x) - PVFB_x$

Then, since $NP_0 = (B \times G_0) - EA$

$$NP_0 = PVFB_x - B \times (PVFP_x - G_0)$$

$$NP_t = B \times G_t \quad \text{for } t > 0$$

Terminal reserve for rider year t

$${}_tV_x = \left[\left(\sum_{j=t}^{n-1} C_{x+j} \times b_{j+1} \right) - \sum_{j=t}^{n-1} D_{x+j} \times NP_j \right] \div D_x$$

B. Segmented Reserves

Determine segment lengths.

Find the minimum value of m for which $Gross_m$ is greater than R_m where $Gross_m$ and R_m are defined as follows:

$$Gross_m = G_{x+k+m} \div G_{x+k+m-1}$$

where,

x = original issue age

k = number of years from date of issue to the beginning of each segment

m = 1, 2, ...; m is reset to 1 at the beginning of each segment

$G_{x+k+m-1}$ = gross premium for rider year m of the segment, only if level for the premium paying period of the rider

$$R_m = q_{x+k+m} \div q_{x+k+m-1}$$

where x , k and m are as defined above, and,

$q_{x+k+m-1}$ = valuation mortality rate for deficiency reserves in rider year $k+m$

Equivalent Level Renewal Amount

$$ELRA = \left[\sum_{j=1}^{k-1} C_{x+j} \times b_{j+1} \right] \div \sum_{j=1}^{n-1} C_{x+j}$$

Present value of future gross premiums at age x

$$PVFP_x = \left[\sum_{j=0}^{k-1} D_{x+j} \times G_j \right] \div D_x$$

Present value of future benefits at age x

$$PVFB_x = \left[\sum_{j=0}^{k-1} C_{x+j} \times b_{j+1} \right] \div D_x$$

Expense allowance

EA = Max { 0 ; Min [(a) and (b)] }, for the first segment only. For all later segments, EA = 0

$$(a) = \left[(PVFB_x - c_x) \div {}_1|PVA_x \right] - c_x$$

$$(b) = (ELRA \times {}_{19}P_{x+1}) - c_x$$

Valuation net premium as a percentage of gross premium

$$B = (PVFB_x + EA) \div PVFP_x$$

Valuation net premium for rider year t+1

$$NP_0 = PVFB_x - B \times (PVFP_x - G_0)$$

$$NP_t = B \times G_t \quad \text{for } t > 0$$

Terminal reserve for rider year t

$${}_tV_x = \left[\left(\sum_{j=t}^{k-1} C_{x+j} \times b_{j+1} \right) - \sum_{j=t}^{k-1} D_{x+j} \times NP_j \right] \div D_x$$

C. Deficiency Reserves

Using the previous formulas, recalculate the reserves with two adjustments:

- multiply the probability of death by the “x-factor”, and
- substitute the gross premium whenever it is smaller than the net premium for that duration.

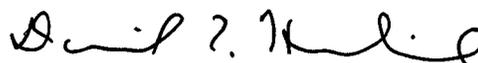
Deficiency reserves are equal to the excess of the recalculated reserves over the base reserves.

The x-factors shall be an array of percentages that:

- are not less than 20% in any year;
- do not decrease in any successive years;
- when the valuation interest rate is used, the actuarial present value of future death benefits for mortality rate using the x factor is greater than or equal to the actuarial present value of death benefits calculated using anticipated mortality experience without mortality improvement; and
- for each of the first 5 years, the x-factor mortality is at least as great as the anticipated mortality experience.

07/21/2008

Date



Daniel E. Haneline, FSA, MAAA
Actuary

THE LAFAYETTE LIFE INSURANCE COMPANY
 NUMERICAL SNFL EXAMPLE
 TERM TO 105 LIFE INS RIDER -- 10 YEAR PLAN
 RIDER FORM: TLR-08

2001 CSO ALB 5.0 PERCENT INTEREST
 INIT TRM: BAS ONLY RENL: SCL 2
 PREMIUM EXPIRATION DATE: AGE 65 OR 20 YRS
 MALE NONSMOKER
 X = ISSUE AGE 35

PVA	PNL	EA	K
X	X	X	X
15.7207	3.2825	14.1031	.701651

DUR (T)	ANNUAL PREM	PVP X+T	PVB X+T	NFV T X	DUR (T)	ANNUAL PREM	PVP X+T	PVB X+T	NFV T X
0	1.17	93.64	51.60	(14.10)					
1	1.17	97.21	53.12	(15.08)					
2	1.17	100.96	54.67	(16.16)					
3	1.17	104.91	56.24	(17.37)					
4	1.17	109.07	57.79	(18.73)					
5	1.17	113.45	59.36	(20.25)					
6	1.17	118.08	60.90	(21.95)					
7	1.17	122.96	62.40	(23.88)					
8	1.17	128.11	63.82	(26.06)					
9	1.17	133.55	65.14	(28.56)					
10	4.88	139.31	66.34	(31.41)					
11	5.34	141.49	67.38	(31.90)					
12	5.72	143.34	68.26	(32.32)					
13	6.02	144.92	69.01	(32.67)					
14	6.40	146.29	69.66	(32.98)					
15	6.90	147.35	70.17	(33.22)					
16	7.54	147.98	70.47	(33.36)					
17	8.32	148.02	70.49	(33.37)					
18	9.22	147.30	70.14	(33.21)					
19	10.36	145.66	69.36	(32.84)					
20	11.64	142.80	68.00	(32.20)					
21	12.96	138.53	65.97	(31.23)					
22	14.24	132.71	63.19	(29.92)					
23	15.52	125.28	59.66	(28.25)					
24	17.02	116.15	55.31	(26.19)					
25	18.84	104.98	49.99	(23.67)					
26	21.06	91.31	43.48	(20.59)					
27	23.64	74.54	35.50	(16.81)					
28	26.46	54.09	25.76	(12.20)					
29	29.40	29.40	14.00	(6.63)					

THE LAFAYETTE LIFE INSURANCE COMPANY

NUMERICAL SNFL EXAMPLE
 TERM LIFE INSURANCE RIDER
 RIDER FORM: TLR-08

COMMUTATION COLUMNS (DIVIDED BY 1,000,000,000)
 2001 CSO ALB 5.0 PERCENT INTEREST
 MALE NONSMOKER

ATT AGE	D X	N X	C X	M X	ATT AGE	D X	N X	C X	M X
21	3573.47908	68893.41198	3.23315	292.84041	71	234.32484	2172.47395	6.24643	130.87370
22	3400.08026	65319.93290	3.07626	289.60727	72	216.92008	1938.14911	6.43943	124.62727
23	3235.09541	61919.85264	2.95780	286.53100	73	200.15113	1721.22903	6.58021	118.18784
24	3078.08545	58684.75722	2.84356	283.57320	74	184.03991	1521.07790	6.68153	111.60763
25	2928.66639	55606.67177	2.78921	280.72964	75	168.59458	1337.03799	6.75021	104.92611
26	2786.41688	52678.00539	2.75988	277.94043	76	153.81606	1168.44340	6.80599	98.17590
27	2650.97048	49891.58851	2.67622	275.18055	77	139.68549	1014.62734	6.86454	91.36991
28	2522.05757	47240.61803	2.49804	272.50433	78	126.16926	874.94185	6.91768	84.50536
29	2399.46155	44718.56046	2.35376	270.00629	79	113.24352	748.77259	6.93050	77.58768
30	2282.84772	42319.09890	2.21762	267.65254	80	100.92047	635.52907	6.89335	70.65718
31	2171.92307	40036.25118	2.08918	265.43491	81	89.22138	534.60860	6.78337	63.76383
32	2066.40897	37864.32812	2.00737	263.34573	82	78.18937	445.38722	6.58429	56.98046
33	1966.00118	35797.91914	1.96600	261.33836	83	67.88178	367.19785	6.32270	50.39617
34	1870.41607	33831.91796	1.90604	259.37236	84	58.32661	299.31607	6.01208	44.07346
35	1779.44260	31961.50189	1.89807	257.46632	85	49.53707	240.98946	5.65336	38.06138
36	1692.80916	30182.05929	1.88627	255.56825	86	41.52480	191.45239	5.24359	32.40802
37	1610.31293	28489.25013	1.90170	253.68197	87	34.30384	149.92759	4.78228	27.16443
38	1531.72966	26878.93720	1.94019	251.78027	88	27.88804	115.62375	4.27723	22.38215
39	1456.84996	25347.20754	1.95634	249.84008	89	22.28281	87.73572	3.74394	18.10492
40	1385.51981	23890.35758	2.00570	247.88374	90	17.47779	65.45291	3.19161	14.36098
41	1317.53697	22504.83776	2.07042	245.87803	91	13.45390	47.97512	2.65003	11.16937
42	1252.72670	21187.30079	2.15946	243.80762	92	10.16320	34.52122	2.15479	8.51934
43	1190.91359	19934.57409	2.26841	241.64815	93	7.52445	24.35802	1.71471	6.36454
44	1131.93501	18743.66050	2.38245	239.37975	94	5.45143	16.83357	1.33342	4.64983
45	1075.65089	17611.72549	2.49961	236.99729	95	3.85842	11.38214	1.00763	3.31641
46	1021.92981	16536.07460	2.59862	234.49769	96	2.66705	7.52372	.73961	2.30878
47	970.66786	15514.14479	2.64391	231.89907	97	1.80044	4.85668	.53029	1.56916
48	921.80167	14543.47693	2.64250	229.25515	98	1.18441	3.05624	.37060	1.03888
49	875.26386	13621.67526	2.66747	226.61265	99	.75741	1.87183	.25183	.66828
50	830.91715	12746.41140	2.73016	223.94518	100	.46952	1.11442	.16489	.41645
51	788.61951	11915.49425	2.83152	221.21503	101	.28227	.64490	.10382	.25156
52	748.23468	11126.87473	2.96443	218.38351	102	.16501	.36263	.06360	.14774
53	709.64003	10378.64005	3.11566	215.41907	103	.09355	.19763	.03781	.08414
54	672.73199	9669.00002	3.31881	212.30341	104	.05128	.10408	.02175	.04632
55	637.37832	8996.26804	3.53290	208.98460	105	.02709	.05280	.01205	.02458
56	603.49407	8358.88972	3.72442	205.45171	106	.01375	.02571	.00642	.01252
57	571.03184	7755.39565	3.87214	201.72728	107	.00667	.01196	.00327	.00610
58	539.96771	7184.36381	3.99062	197.85515	108	.00308	.00529	.00159	.00283
59	510.26434	6644.39610	4.13557	193.86453	109	.00135	.00222	.00073	.00124
60	481.83047	6134.13176	4.32271	189.72896	110	.00055	.00087	.00031	.00051
61	454.56345	5652.30129	4.55862	185.40625	111	.00021	.00032	.00013	.00020
62	428.35895	5197.73784	4.82210	180.84763	112	.00007	.00011	.00005	.00007
63	403.13881	4769.37889	5.07955	176.02553	113	.00002	.00003	.00002	.00002
64	378.86217	4366.24008	5.30407	170.94598	114	.00001	.00001	.00000	.00001
65	355.51705	3987.37790	5.49528	165.64191	115	.00000	.00000	.00000	.00000
66	333.09239	3631.86086	5.64036	160.14663	116	.00000	.00000	.00000	.00000
67	311.59048	3298.76847	5.75701	154.50627	117	.00000	.00000	.00000	.00000
68	290.99583	2987.17799	5.85040	148.74926	118	.00000	.00000	.00000	.00000
69	271.28849	2696.18216	5.95026	142.89886	119	.00000	.00000	.00000	.00000
70	252.41973	2424.89367	6.07490	136.94860	120	.00000	.00000	.00000	.00000



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July 31, 2008

Arkansas Department of Insurance

RE: INDIVIDUAL LIFE SUBMISSION
Term Life Insurance Rider Forms – TLR-08 & TLR-08U
Schedule Pages – TLR-08-10; TLR-08-20; TLR-08-30; TLR-08-10U; TLR-08-20U; and
TLR-08-30U

Attached for your consideration and approval are the above-captioned term life insurance riders and policy schedule pages, which were approved for use in our domiciliary state, Indiana, on 7/23/08. These forms are a new submission and will not be replacing any form previously approved for use in your state. These forms are being submitted to you in final print format. However, although the wording and text size of the document will not differ, the formatting and font may vary for reasons not limited to the parameter settings of the printer being used, the web browser settings and the respective capabilities of each.

These Term Life Insurance Rider forms will be used with our whole life policy forms which are currently approved, or similar whole life policy forms for which we obtain approval in the future. Currently approved whole life policy forms, and the initial terms of the riders which will be used with them, are:

Whole Life Policy Forms	Initial Term		
	10	20	30
WL-05-100; WL-05-100U; WL-05-100 EXT; WL-05-100U EXT	x	x	x
WL-05-95; WL-05-95U; WL-05-95 EXT; WL-05-95U EXT	x	x	x
WL-05-75; WL-05-75U; WL-05-75 EXT; WL-05-75U EXT	x	x	
WL-05-65; WL-05-65U; WL-05-65 EXT; WL-05-65U EXT	x		

These whole life policy forms were approved for use in your state on 12/22/2005.

Forms TLR-08 and TLR-08U provide non-participating convertible term insurance. During the initial term, 10 (Term 10), 20 (Term 20) or 30 (Term 30) years, premiums for these riders are level. After the initial term, these riders may be renewed for a one-year term at an increased rate on each renewal date. Conversion to a permanent life plan is available during the initial term period (but not beyond age 65).

Issues ages for these riders are 18 to 75 for Term 10; 18 to 65 for Term 20; and 18 to 55 (male and unisex smokers are limited to a max age of 50) for term 30. Coverage under these riders terminates as follows: Term 10 – Later of age 65 or 20 years; Term 20 – Later of age 75 or 30 years; and Term 30 – Age 95.

To assist your review, attached are a sample Schedule Pages for traditional life policies with a Term Life Insurance Rider. Also attached is an Actuarial Memorandum applicable to these policies, along with any certifications, filing fees or additional form documentation required by your state's form filing laws and/or regulations.

We are hopeful this submission may now be approved for use in your state. However, should you have any questions or require anything further, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Kate Donnoe". The signature is written in a cursive, flowing style.

Kate Donnoe, FLMI, AIRC, AIAA, ARA, ACS
Senior Compliance Analyst

POLICY SCHEDULE

Policy Number: {A 0123456} Interest Rate for
 Date of Issue: {January 1, 2009} Basis of Values: 4.5%

Insured: {John E. Doe}
 Age: {35}
 Sex: {Male}
 Rate Class: {Nonsmoker}

Basic Amount
 of Insurance: {\$100,000}

Owner: {John E. Doe}

Premiums

Each Benefit Premium is payable
 to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,523.00}	{Jan 1, 2069}
{10} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{58.50} *	{Jan 1, 2039}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{50.50}	{Jan 1, 2039}

Total {1,632.00} **

Other Frequencies of Premium Payments	Semiannual	{832.32}
	Quarterly	{424.32}
	Monthly (Preauthorized Withdrawal)	{138.72}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.

POLICY SCHEDULE

Policy Number: {A 0123456} Interest Rate for
 Date of Issue: {January 1, 2009} Basis of Values: 4.5%

Insured: {John E. Doe}
 Age: {35}
 Sex: {Male}
 Rate Class: {Nonsmoker}

Basic Amount
 of Insurance: {\$100,000}

Owner: {John E. Doe}

Premiums

Each Benefit Premium is payable
 to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,523.00}	{Jan 1, 2069}
{20} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{74.00} *	{Jan 1, 2049}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{52.50}	{Jan 1, 2039}
Total			{1,649.50} **	

Other Frequencies of Premium Payments	Semiannual	{841.25}
	Quarterly	{428.87}
	Monthly (Preauthorized Withdrawal)	{140.21}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.

POLICY SCHEDULE

Policy Number: {A 0123456} Interest Rate for
 Date of Issue: {January 1, 2009} Basis of Values: 4.5%

Insured: {John E. Doe}
 Age: {35}
 Sex: {Male}
 Rate Class: {Nonsmoker}

Basic Amount
 of Insurance: {\$100,000}

Owner: {John E. Doe}

Premiums

Each Benefit Premium is payable
 to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,523.00}	{Jan 1, 2069}
{30} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{110.00} *	{Jan 1, 2069}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{53.00}	{Jan 1, 2039}
Total			{1,686.00} **	
Other Frequencies of Premium Payments			Semiannual	{859.86}
			Quarterly	{438.36}
			Monthly (Preauthorized Withdrawal)	{143.31}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.

POLICY SCHEDULE

Policy Number: {A 0123456} Interest Rate for
 Date of Issue: {January 1, 2009} Basis of Values: 4.5%

Insured: {John E. Doe}
 Age: {35}

Rate Class: {Nonsmoker}

Basic Amount
 of Insurance: {\$100,000}

Owner: {John E. Doe}

Premiums

Each Benefit Premium is payable
 to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,472.00}	{Jan 1, 2069}
{10} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{55.50} *	{Jan 1, 2039}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{50.50}	{Jan 1, 2039}
Total			{1,578.00} **	

Other Frequencies of Premium Payments	Semiannual	{804.78}
	Quarterly	{410.28}
	Monthly (Preauthorized Withdrawal)	{134.13}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.

POLICY SCHEDULE

Policy Number:	{A 0123456}	Interest Rate for	
Date of Issue:	{January 1, 2009}	Basis of Values:	4.5%
Insured:	{John E. Doe}		
Age:	{35}		
Rate Class:	{Nonsmoker}		
Basic Amount of Insurance:	{\$100,000}		
Owner:	{John E. Doe}		

Premiums

Each Benefit Premium is payable
to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,472.00}	{Jan 1, 2069}
{20} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{71.00} *	{Jan 1, 2049}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{52.50}	{Jan 1, 2039}
		Total	{1,595.50} **	
Other Frequencies of Premium Payments			Semiannual	{813.71}
			Quarterly	{414.83}
			Monthly (Preauthorized Withdrawal)	{135.62}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.

POLICY SCHEDULE

Policy Number: {A 0123456} Interest Rate for
 Date of Issue: {January 1, 2009} Basis of Values: 4.5%

Insured: {John E. Doe}
 Age: {35}

Rate Class: {Nonsmoker}

Basic Amount
 of Insurance: {\$100,000}

Owner: {John E. Doe}

Premiums

Each Benefit Premium is payable
 to the Premium Expiration Date

Benefit	Effective Date	Initial Amount of Insurance	Annual Premium	Premium Expiration Date
Life Paid-Up at 95	{Jan 1, 2009}	{\$100,000}	{1,472.00}	{Jan 1, 2069}
{30} Year Term Life Rider	{Jan 1, 2009}	{\$50,000}	{105.50} *	{Jan 1, 2069}
Waiver of Premium Benefit Rider	{Jan 1, 2009}	N/A	{53.00}	{Jan 1, 2039}
Total			{1,630.50} **	
Other Frequencies of Premium Payments			Semiannual	{831.56}
			Quarterly	{423.93}
			Monthly (Preauthorized Withdrawal)	{138.59}

* The initial annual premium shown here applies for the Initial Term period only. Thereafter the premium rates increase each rider year. See the Renewal Table on Schedule Page 4M for the increased rates at which the rider may be renewed.

** This amount will be higher if premiums are paid on a semiannual, quarterly or monthly basis.