

SERFF Tracking Number: UTAC-126264636 State: Arkansas
 Filing Company: Loyal American Life Insurance Company State Tracking Number: 43210
 Company Tracking Number: L-5420.V2-AR
 TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life
 Product Name: Life- Statement of Policy Cost & Benefit Information
 Project Name/Number: Life- Statement of Policy Cost & Benefit Information/L-5420.V2-AR

Filing at a Glance

Company: Loyal American Life Insurance Company

Product Name: Life- Statement of Policy Cost & SERFF Tr Num: UTAC-126264636 State: Arkansas

Benefit Information

TOI: L071 Individual Life - Whole

SERFF Status: Closed-Approved- Closed State Tr Num: 43210

Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Co Tr Num: L-5420.V2-AR

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Author: Mary Barrett

Disposition Date: 08/18/2009

Date Submitted: 08/12/2009

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Life- Statement of Policy Cost & Benefit Information

Status of Filing in Domicile: Not Filed

Project Number: L-5420.V2-AR

Date Approved in Domicile:

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: 08/18/2009

Explanation for Other Group Market Type:

State Status Changed: 08/18/2009

Deemer Date:

Created By: Mary Barrett

Submitted By: Mary Barrett

Corresponding Filing Tracking Number:

Filing Description:

Re: Loyal American Life Insurance Company

NAIC # 65722 FEIN # 63-0343428

FORMS SUBMITTED DESCRIPTION

L-5420.V2-AR Statement of Policy Cost And Benefit Information

L-5421.V2-AR Statement of Policy Cost And Benefit Information

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**TO BE USED WITH PREVIOUSLY APPROVED POLICIES:
FORM NUMBERS**

L-5420-AR Final Expense Whole Life Policy
L-5421-AR Graded Death Benefit Whole Life Policy

Dear Sir or Madam,

In compliance with the newly amended Rule 17, (Life Insurance Disclosure) we are submitting the above reference forms.

The Statement of Policy Cost And Benefit Information (Page 4), L-5420.V2-AR, was developed to be used with our approved Final Expense Whole Life Policy, L-5420-AR. The Statement of Policy Cost And Benefit Information (Page 4), L-5421.V2-AR, was developed to be used with our approved Graded Death Benefit Whole Life Policy L-5421-AR.

If you should have any questions regarding this submission, please feel free to call me toll-free at 1-800-633-6752, extension 1553 or fax me at (513) 564-3435. My email address is mbarrett@gafri.com.

Sincerely,

Mary Barrett, FLMI, AIRC, ALHC, HIA
Compliance Analyst

Company and Contact

Filing Contact Information

Mary Barrett, Senior Compliance Analyst mbarrett@gafri.com
5508 Parkcrest Drive 800-880-8824 [Phone] 3303 [Ext]
P.O. Box 26580 512-451-0357 [FAX]
Austin, TX 78755-0580

Filing Company Information

Loyal American Life Insurance Company CoCode: 65722 State of Domicile: Ohio
11200 Lakeline Blvd., Suite 100 Group Code: 84 Company Type: Insurance Company
P.O. Box 559004 Group Name: State ID Number:

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Product Name: Life- Statement of Policy Cost & Benefit Information
Project Name/Number: Life- Statement of Policy Cost & Benefit Information/L-5420.V2-AR
Austin, TX 78755-9004 FEIN Number: 63-0343428
(800) 633-6752 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$40.00
Retaliatory? No
Fee Explanation: 2 forms submission =
2 X \$20= \$40.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Loyal American Life Insurance Company	\$40.00	08/12/2009	29809000

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	08/18/2009	08/18/2009

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Disposition

Disposition Date: 08/18/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UTAC-126264636 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Statement of Policy Cost And Benefit Information		Yes
Form	Statement of Policy Cost And Benefit Information		Yes

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Form Schedule

Lead Form Number: L-5420.V2-AR

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	L-5420.V2-AR	Other	Statement of Policy Cost And Benefit Information	Initial		40.000	L-5420.V2-AR.pdf
	L-5421.V2-AR	Other	Statement of Policy Cost And Benefit Information	Initial		40.000	L-5421.V2-AR.pdf

POLICY NO. [0012345678]

STATEMENT OF POLICY COST AND BENEFIT INFORMATION

THIS ILLUSTRATION IS A POLICY SUMMARY FOR [DOE, JOHN]

THE PROPOSED INSURANCE, SUPPLEMENTAL BENEFITS, AND VALUES ARE AS FOLLOWS

COVERAGE	GRADED BENEFIT WHOLE LIFE INSURANCE
FACE AMOUNT OF INSURANCE	[\$10,000]
INITIAL BASIC PREMIUM	[\$790.00]
PREMIUM CREDIT-MONTHLY	[\$67.15]
POLICY PAYING PERIOD	[MONTHLY, QUARTERLY, SEMI-ANNUAL, ANNUAL]

AGE	YEAR	ANNUAL PREMIUM	END OF YEAR CASH VALUES*	BEG. OF YEAR DEATH BENEFIT
[66	1	\$790.00		\$869.00
67	2	\$790.00	328.40	\$1,824.90
68	3	\$790.00	731.95	\$2,876.40
69	4	\$790.00	1,004.92	\$10,000.00
70	5	\$790.00	1,284.08	\$10,000.00
71	6	\$790.00	1,567.73	\$10,000.00
72	7	\$790.00	1,855.41	\$10,000.00
73	8	\$790.00	2,142.88	\$10,000.00
74	9	\$790.00	2,430.62	\$10,000.00
75	10	\$790.00	2,719.35	\$10,000.00
76	11	\$790.00	3,008.90	\$10,000.00
77	12	\$790.00	3,299.25	\$10,000.00
78	13	\$790.00	3,588.53	\$10,000.00
79	14	\$790.00	3,874.37	\$10,000.00
80	15	\$790.00	4,154.36	\$10,000.00
81	16	\$790.00	4,428.11	\$10,000.00
82	17	\$790.00	4,693.30	\$10,000.00
83	18	\$790.00	4,951.41	\$10,000.00
84	19	\$790.00	5,202.56	\$10,000.00
85	20	\$790.00	5,445.65	\$10,000.00
120	55	\$790.00	10,000.00	\$10,000.00]

THE BENEFIT PAYABLE ON DEATH DURING THE FIRST THREE POLICY YEARS WILL BE THE REDUCED BENEFIT AMOUNT SHOWN ON THE POLICY DATA PAGE.:

THE DEATH BENEFIT AFTER THE THIRD POLICY ANNIVERSARY WILL BE THE FACE AMOUNT OF INSURANCE, LESS ANY POLICY LOAN.

	10 YEARS	20 YEARS
LIFE INSURANCE SURRENDER COST INDEX	[\$85.95	\$78.99
LIFE INSURANCE NET PAYMENT COST INDEX	\$116.25	\$98.57]

AN EXPLANATION OF THE INTENDED USE OF THESE INDEXES IS PROVIDED IN THE LIFE INSURANCE BUYERS GUIDE.

THE EFFECTIVE ANNUAL POLICY LOAN INTEREST RATE FOR LOANS ON THIS POLICY WILL BE 7.40% PAID IN ADVANCE.

PREPARED ON [April 11, 2005] FOR PRESENTATION BY [JAMES DOE
123 ANY STREET
ANY CITY, USA]

*BLANK SPACE INDICATES ZERO END OF YEAR CASH

LOYAL AMERICAN LIFE INSURANCE COMPANY
P.O. BOX 559004, AUSTIN, TEXAS 78755-9004

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: FLESCH.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: Not applicable to submission Comments:		

	Item Status:	Status Date:
Bypassed - Item: Life & Annuity - Acturial Memo Bypass Reason: Not applicable to submission Comments:		

CERTIFICATION OF FLESCH READING EASE TEST

RE: LOYAL AMERICAN LIFE INSURANCE COMPANY

This is to certify that the form listed below is in compliance with the readability requirements of the Flesch Reading ease test.

The Flesch test was applied to this form in its entirety, except that titles, major headings and sub-headings and tables were excluded.

The Flesch reading ease test score is:

FORM NUMBER

L-5420.V2-AR

L-5421.V2-AR

FLESCH SCORE

40

40

Loyal American Life Insurance Company

By: Billy Hill Jr.

Billy Hill, Jr., President

Date: August 12, 2009