

SERFF Tracking Number: FUDL-126902106 State: Arkansas  
Filing Company: Funeral Directors Life Insurance Company State Tracking Number: 47538  
Company Tracking Number:  
TOI: L07G Group Life - Whole Sub-TOI: L07G.104 Fixed/Indeterminate Premium - Single Life - Funeral Expense  
Product Name: GRPAP402CA-03-LP  
Project Name/Number: /

## Filing at a Glance

Company: Funeral Directors Life Insurance Company

Product Name: GRPAP402CA-03-LP

TOI: L07G Group Life - Whole

Sub-TOI: L07G.104 Fixed/Indeterminate  
Premium - Single Life - Funeral Expense

Filing Type: Form

SERFF Tr Num: FUDL-126902106 State: Arkansas

SERFF Status: Closed-Approved-  
Closed State Tr Num: 47538

Co Tr Num:

State Status: Approved-Closed

Author: Mike Walls

Date Submitted: 12/15/2010

Reviewer(s): Linda Bird

Disposition Date: 12/16/2010

Disposition Status: Approved-  
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

## General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 12/16/2010

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 08/06/2008

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Trust

Explanation for Other Group Market Type:

State Status Changed: 12/16/2010

Created By: Mike Walls

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Mike Walls

Filing Description:

Limited Pay Schedule Page for 1 yr Limited Benefit

## Company and Contact

### Filing Contact Information

Mike Walls,  
P.O. Box 726

chaselaw@camalott.com  
325-673-3745 [Phone]

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Abilene, TX 79604

**Filing Company Information**

Funeral Directors Life Insurance Company	CoCode: 99775	State of Domicile: Texas
6550 Directors Parkway	Group Code: 801	Company Type: Life
Abilene, TX 79606	Group Name: DIG	State ID Number:
(325) 695-3412 ext. [Phone]	FEIN Number: 74-1001040	

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**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? Yes  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Funeral Directors Life Insurance Company	\$50.00	12/15/2010	42995340

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	12/16/2010	12/16/2010

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## **Disposition**

Disposition Date: 12/16/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.



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## Form Schedule

**Lead Form Number: GRPAP402CA-03-LP**

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	GRPAP402CA-03-LP	Schedule Pages	Death Benefit Schedule	Initial		40.100	GRPAP402CA-03-LP.pdf

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**PERSONAL INFORMATION**

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Certificate Number: [Sample002]

Covered Person: [John Doe]

Issue Age: [35]

Face Amount: \$[5,000]

Certificate Date: [January 24, 2006]

Limited death benefit period:

1 Year

**DEATH BENEFIT SCHEDULE.**

Death Benefit per \$1,000 Alternative Insurance Amount

Certificate Month of Death	Years Premiums are Payable				
	2	3	5	7	10
1	\$ 60	\$ 45	\$ 30	\$ 25	\$ 20
2	\$ 120	\$ 90	\$ 60	\$ 50	\$ 40
3	\$ 180	\$ 135	\$ 90	\$ 75	\$ 60
4	\$ 240	\$ 180	\$ 120	\$ 100	\$ 80
5	\$ 300	\$ 225	\$ 150	\$ 125	\$ 100
6	\$ 360	\$ 270	\$ 180	\$ 150	\$ 120
7-12	\$ 730	\$ 550	\$ 360	\$ 300	\$ 250
Thereafter	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000

The death benefit is limited to the amount shown.

Premium: Limited pay – premium payable for [10] years.

Monthly Draft	Monthly Payment	Quarterly Payment	Semi-annual Payment	Annual Payment
[\$70.00]	[\$72.17]	[\$216.30]	[\$432.60]	[\$786.87]

Owner and Beneficiary: As designated in the application or as later changed.

**Cash Values Table.**

(See following insert page)

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification		
<b>Comments:</b> See attached.		
<b>Attachment:</b> Flesch Certification.pdf		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Application		
<b>Comments:</b> The schedule submitted is a supplement to Group Certificate GRPAP402CA approved for use on July 16, 2002 and will use application form GRPAP402-APP approved for use on July 16, 2002.		

December 15, 2010

## FLESCH READABILITY CERTIFICATION

Form GRPAP402CA-03-LP

I certify that the above referenced form attains a Flesch readability score of 40.1. In calculating this score, the name and address of the insurer, the title and form number of the endorsement and the signatures were excluded.

A handwritten signature in black ink, appearing to read 'C. Walls', written in a cursive style.

Charles M. Walls

Attorney for Funeral Directors Life Insurance Company