

SERFF Tracking Number: ASLX-126619196 State: Arkansas
Filing Company: American Memorial Life Insurance Company State Tracking Number: 45616
Company Tracking Number: LF AR01260AMF01
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: Corporate Compliance Filing
Project Name/Number: Corporate Compliance Filing/LF AR01260AMF01

Filing at a Glance

Company: American Memorial Life Insurance Company

Product Name: Corporate Compliance Filing SERFF Tr Num: ASLX-126619196 State: Arkansas
TOI: L08 Life - Other SERFF Status: Closed-Accepted State Tr Num: 45616
For Informational Purposes
Sub-TOI: L08.000 Life - Other Co Tr Num: LF AR01260AMF01 State Status: Filed-Closed
Filing Type: Form Reviewer(s): Linda Bird
Author: SPI AssurantLH Disposition Date: 05/11/2010
Date Submitted: 05/07/2010 Disposition Status: Accepted For
Informational Purposes
Implementation Date: Implementation Date:

Implementation Date Requested: 06/11/2010

State Filing Description:

General Information

Project Name: Corporate Compliance Filing
Project Number: LF AR01260AMF01
Requested Filing Mode: Informational
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 05/11/2010

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type:
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 05/11/2010
Created By: SPI AssurantLH
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: SPI AssurantLH

Filing Description:

Please see cover letter.

Company and Contact

Filing Contact Information

Jennifer Drabik, Compliance Analyst
440 Mount Rushmore Road
Rapid City, SD 57701

jennifer.dunlap@assurant.com
605-719-0073 [Phone] 57073 [Ext]
605-719-0473 [FAX]

Filing Company Information

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 American Memorial Life Insurance Company CoCode: 67989 State of Domicile: South Dakota
 440 Mount Rushmore Road Group Code: 19 Company Type:
 Rapid City, SD 57701 Group Name: Assurant, Inc. Group State ID Number:
 (605) 719-0999 ext. [Phone] FEIN Number: 46-0260270

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Memorial Life Insurance Company	\$20.00	05/07/2010	36315120

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	05/11/2010	05/11/2010

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Disposition

Disposition Date: 05/11/2010

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Cover Letter		No

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: Not applicable Comments:		
Bypassed - Item: Application Bypass Reason: GRP-1130-AR, approved April 14, 2010 Comments:		
Satisfied - Item: Cover Letter Comments: Cover Letter Attachment: Cover Letter.PDF		



May 7, 2010

Arkansas Department of Insurance
1200 W. Third Street
Little Rock, AR 72201-1904

Re: American Memorial Life Insurance Company
NAIC #0019-67989 FEIN #46-0260270
Informational Letter - Automated On-line Enrollment Form process

Dear Commissioner:

This letter is to inform you that American Memorial Life Insurance Company is working on a project to switch from a manual handwritten Enrollment Form process to an automated Enrollment Form process. Enrollment Form GRP-1130-AR was previously approved by you on April 14, 2010.

Currently, with our manual process, the Enrollment Forms that have been approved by the appropriate Departments of Insurance are filled out by hand and signed by the Proposed Insured or Owner. One copy of the Enrollment Form is left with the Proposed Insured, a copy is mailed to American Memorial Life Insurance Company's home office and the agent keeps a copy.

The automated Enrollment Form process will allow the agent to meet with the Proposed Insured and go through a series of questions that will populate the fields for any forms that are required to be completed using a laptop computer. The Proposed Insured will initial or sign as required on the forms by using a signature pad. Please note that we will be making no changes to the material content of the previously approved forms. We will not change the font or the font size, however, there may be a different flow of the text due to the nature of the software and are subject only to minor modification in paper size and stock, ink, shading, border, company logo and adaptation to computer printing. The Proposed Insured will receive a copy of all required forms at time of sale. The required forms will be transmitted securely to American Memorial Life Insurance Company for processing. Our plan is to implement this project towards the end of 2010 beginning of 2011.

Please let me know if there is any additional information that you require regarding the automated Enrollment Form process. We would appreciate your acknowledgement of receipt of this letter.

If you have any questions or need additional information, please feel free to contact me via e-mail (jennifer.drabik@assurant.com) or phone (605-719-0073).

Sincerely,

AMERICAN MEMORIAL LIFE INSURANCE COMPANY

A handwritten signature in black ink that reads "Jennifer Drabik". The signature is written in a cursive style with a large, prominent initial "J".

Jennifer Drabik
Compliance Analyst

:jld