

SERFF Tracking Number: LBLI-127134081 State: Arkansas
Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
Company Tracking Number:
TOI: L04I Individual Life - Term Sub-TOI: L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: NEWTERM
Project Name/Number: NEWTERM/

Filing at a Glance

Company: Liberty Bankers Life Insurance Company

Product Name: NEWTERM

SERFF Tr Num: LBLI-127134081 State: Arkansas

TOI: L04I Individual Life - Term

SERFF Status: Closed-Approved-
Closed State Tr Num: 48587

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

Co Tr Num: State Status: Approved-Closed

Filing Type: Form

Author: Chad Leiding

Reviewer(s): Linda Bird

Date Submitted: 04/26/2011

Disposition Date: 04/29/2011

Disposition Status: Approved-
Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: NEWTERM

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 04/29/2011

State Status Changed: 04/29/2011

Deemer Date:

Created By: Chad Leiding

Submitted By: Chad Leiding

Corresponding Filing Tracking Number:

Filing Description:

RE: Liberty Bankers Life Insurance Company

NAIC# 68543

FEIN# 25-1093277

Form #: LBL TERM-0211-AR Med-free Term Life Policy

To whom it may concern:

SERFF Tracking Number: LBLI-127134081 State: Arkansas
Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
Company Tracking Number:
TOI: L04I Individual Life - Term Sub-TOI: L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: NEWTERM
Project Name/Number: NEWTERM/

The above listed form is submitted to your department for review and approval. This form is new and not intended to replace any previously approved form. This form has been submitted for review and approval to our domiciliary state concurrent with this filing.

Form LBL-TERM-0211-AR is a basic term life policy with limited underwriting. The terms of 10, 15, 20 and 30 years will be marketed. Included in the Supporting Documents tab are Schedule Pages for each term period. The death benefit and the premiums are level. The issue ages range from age 18 to age 65. The issue amounts are \$25,000 to \$250,000. This term life policy will be underwritten using the information gathered via the application, MIB, Prescription check and MVR (motor vehicle reports) along with APS's (attending physicians statements) as needed. It will not require a Medical Examination or Blood work, hence the moniker "Med-Free Term."

Application Form LBL-WL-APP (0307) was previously filed with your Department and will be used with this product. LBL APP REINSTATE(0806)-AR is the reinstatement application for this product and was previously filed/approved with your Department.

Previously approved life riders LBL-WPR-0408, LBL-CHILD-0408, LBL-ADD-0408, LBL-GHILD-0310 and LBL-ALBR-0609 will be used with this product.

These products will not be marketed with an illustration since all premiums and benefits are guaranteed.

Target Market

The forms will be marketed by fully licensed independent agents, appointed with our company through established life agencies to individuals of all ages who are looking for basic amounts of life insurance to cover last expense needs without having to go through extensive underwriting requirements. It will not be marketed as a pre-need product.

To the best of our knowledge, this filing is complete, does not contain any unusual that may differ from industry standards and is intended to comply with the insurance laws of your jurisdiction.

Company and Contact

Filing Contact Information

Chad Leiding, V.P Compliance chad.leiding@libertybankerslife.com
1800 Valley View Lane 469-522-4332 [Phone]
Suite 300 469-522-4380 [FAX]
Dallas, TX 75234

Filing Company Information

Liberty Bankers Life Insurance Company CoCode: 68543 State of Domicile: Oklahoma

SERFF Tracking Number: LBLI-127134081 State: Arkansas
 Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
 Company Tracking Number:
 TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
 Fixed/Indeterminate Premium - Single Life

Product Name: NEWTERM
 Project Name/Number: NEWTERM/

1800 Valley View Lane
 Suite 300
 Dallas, TX 75234
 (469) 522-4332 ext. [Phone]

Group Code: 3436
 Group Name:
 FEIN Number: 25-1093227

Company Type: LAH
 State ID Number:

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? Yes
 Fee Explanation: Ok charges \$50 per policy form.
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty Bankers Life Insurance Company	\$50.00	04/26/2011	46961027

SERFF Tracking Number: LBLI-127134081 State: Arkansas
Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
Company Tracking Number:
TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: NEWTERM
Project Name/Number: NEWTERM/

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	04/29/2011	04/29/2011

SERFF Tracking Number: *LBLI-127134081* *State:* *Arkansas*
Filing Company: *Liberty Bankers Life Insurance Company* *State Tracking Number:* *48587*
Company Tracking Number:
TOI: *L04I Individual Life - Term* *Sub-TOI:* *L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life*

Product Name: *NEWTERM*
Project Name/Number: *NEWTERM/*

Disposition

Disposition Date: 04/29/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *LBLI-127134081* State: *Arkansas*
 Filing Company: *Liberty Bankers Life Insurance Company* State Tracking Number: *48587*
 Company Tracking Number:
 TOI: *L041 Individual Life - Term* Sub-TOI: *L041.213 Specified Age or Duration - Fixed/Indeterminate Premium - Single Life*
 Product Name: *NEWTERM*
 Project Name/Number: *NEWTERM/*

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Additional Schedule Pages		Yes
Form	Term Policy Form		Yes

SERFF Tracking Number: LBLI-127134081 State: Arkansas
 Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
 Company Tracking Number:
 TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
 Fixed/Indeterminate Premium - Single Life
 Product Name: NEWTERM
 Project Name/Number: NEWTERM/

Form Schedule

Lead Form Number: LBL TERM-0211-AR

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	LBL TERM-0211-AR	Policy/Cont ract/Fraternal Certificate	Term Policy Form	Initial		54.900	LBL-TERM-0211-AR.pdf



Liberty Bankers Life

Insurance Company

Administrative Office: P O Box 224
Brownwood, Texas 76804-0224
(888) 525-4467
Home Office: 1605 LBJ Freeway, Suite 710
Dallas, Texas 75234
(469) 522-4400 - FAX (469) 522-4401

BENEFIT PROVISIONS

DEATH BENEFIT. Liberty Bankers Life Insurance Company will pay the Insurance Amount to the beneficiary when we receive due proof that the Insured's death occurred on or before the Final Expiration Date and while this policy is in force. We will add to the benefit any part of the premium paid beyond the month in which death occurred. The Insurance Amount and the Expiration Date are shown in the Policy Schedule.

CASH VALUE: If the Insured is living and the policy is in force on the Expiration Date, we will pay the Cash Value, if any, to the owner. Any time before the Expiration Date, while this policy is in force, this policy may be surrendered for its Cash Value. The Cash Value is shown in the Policy Schedule.

Payments are subject to the provisions, terms and conditions of the policy.

Signed as of the Policy Date.

LIBERTY BANKERS LIFE INSURANCE COMPANY.

President

Secretary

RIGHT TO CANCEL

You have the right to return this policy for any reason within 30 days after you receive it. You may return it by mail or in person to your agent or to our Home Office. We will refund any premiums paid and treat the policy as if it were never issued.

READ YOUR POLICY CAREFULLY

IT IS A LEGAL CONTRACT BETWEEN YOU AND US

**CONVERTIBLE LEVEL TERM LIFE INSURANCE POLICY
WITH CASH VALUES AND GUARANTEED LEVEL PREMIUMS
PAYABLE DURING INSURED'S LIFETIME TO EXPIRATION DATE
NONPARTICIPATING**

WARNING: 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.

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A copy of the application and any riders follow page 7.

DEFINITIONS

In this policy:

WE, US and **OUR** refer to **LIBERTY BANKERS LIFE INSURANCE COMPANY**

YOU or **OUR** means the owner.

ATTAINED AGE means the age shown in the Policy Schedule plus the number of years and completed months since the Policy Date.

LAPSE means termination of the policy due to non-payment of premiums.

REINSTATEMENT means to restore coverage after the policy has lapsed.

POLICY DATE is the date used to determine the premium due date, policy anniversaries and policy years.

POLICY SCHEDULE

BENEFITS AND PREMIUMS

BASE POLICY	ANNUAL PREMIUM	YEARS PAYABLE
[20] YEAR LEVEL TERM POLICY	[\$226.00]	[20]

ADDITIONAL BENEFITS PROVIDED BY RIDER

ACCELERATED LIVING BENEFIT RIDER	[\$102.00]	[20]
AD&D W CC RIDER [\$35,000]	[\$35.00]	[20]
CHILD RIDER [2 UNITS]	[\$75.46]	[20]
GRANDCHILD RIDER - \$7,500	[\$12.97]	[20]
WAIVER OF PREMIUM RIDER	[\$27.09]	[20]

TOTAL ANNUAL PREMIUM **[\$478.52]**

PREMIUM PAYMENT METHOD: [ANNUAL]

THE TOTAL PREMIUM MAY BE PAID AS FOLLOWS:

ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
[\$478.52]	[\$244.05]	[\$126.81]	[\$44.26]

POLICY DATA

INSURED:	[JOHN P. DOE]	POLICY NUMBER:	[0000000]
OWNER:	[JOHN P. DOE]	POLICY DATE	[JULY 1, 2011]
INSURED'S AGE, SEX:	[35], [MALE]	INSURANCE AMOUNT:	[\$100,000.00]
PREMIUM CLASS:	[NON TOBACCO]	TERM	[20] YEARS
AGENT ID:	[00001]	EXPIRATION DATE	[JUNE 30, 2031]
PLAN:	[20]YEAR TERM	CONVERSION DATE:	[JUNE 30, 2026]
BENEFICIARY:	[JANE DOE]		

POLICY SCHEDULE
POLICY # 0000000

CASH VALUE TABLE

POLICY YEAR	ENDING CASH VALUE	EXTENDED TERM INSURANCE		RPU AMOUNT
		YEARS	DAYS	
1	0	0	0	0
2	0	0	0	0
3	0	0	0	0
4	0	0	0	0
5	0	0	0	0
6	0	0	0	0
7	0	0	0	0
8	23	0	56	1,000
9	151	0	324	6,100
10	266	1	133	10,900
11	366	1	237	15,400
12	445	1	284	19,600
13	499	1	292	23,300
14	526	1	268	26,800
15	527	1	218	30,000
16	500	1	144	33,200
17	440	1	47	36,200
18	342	0	292	39,200
19	197	0	153	41,900
20	0	Expired		0

The Cash Values above are for the end of the policy year shown and assume all premiums due have been paid. The Cash Value at any time during a policy year depends on the amount of actual policy and rider premiums paid on the life of the Insured.

COMPUTATION TABLES AND INTEREST RATES. Cash Values and Reserves are based on Mortality Table: 2001 CSO age last birthday, Male/Female, Smoker/Nonsmoker, Select & Ultimate

Reserve Method: Net Level Valuation Method

Interest rate for reserves: [4%] all years

Interest rate for cash values: [5%] all years

PREMIUM PAYMENT PROVISIONS

PREMIUMS. To keep this policy in force, each premium must be paid in advance. All premiums must be paid at our Home Office or to our authorized agent. We will issue a receipt upon request. The first premium is due on or before the Policy Date. Subsequent premiums are payable while the Insured is living until the Expiration Date and within the grace period. On written request the premium payment method may be changed on any policy anniversary or renewal date to any other method offered by us.

It may be possible for you to make arrangements with your employer to pay your premiums by payroll deduction. Also, if your bank agrees, you may request that your premiums be automatically withdrawn from your account and paid directly to us by your bank. We will accept monthly premiums paid by either of these methods. If for any reason your employer or bank fails to pay the premium when it is due or during the grace period, this policy will lapse and cease to be in force.

GRACE PERIOD. You have a period of 31 days after the premium due date for payment of each premium after the first. During this grace period, no interest will be charged on the premium due. If the Insured dies during the grace period, any unpaid premium will be deducted from any proceeds payable under this policy. If any premium remains unpaid after the grace period, this policy will lapse and cease to be in force.

CONVERSION PRIVILEGE

CONVERSION BENEFIT. You may convert all or a part of the term insurance provided by this Policy to a new Policy on the Insured's life. This conversion may be made without giving us proof of insurability. To convert, You must ask for the conversion in writing before the last conversion date and while this Policy is in force. The last conversion date is shown in the Schedule Page. Any conversion will be subject to the following provision:

CONVERSION DATE. The conversion date may be any date on or prior to Age 65 or the Policy Anniversary five years prior to the Expiry Date, whichever occurs first. The Policy Date of the new Policy will be the conversion date. The Insured's Age at issue for the new Policy will be his or her attained Age on the conversion date.

PLAN OF INSURANCE. The new Policy may be on any form of level permanent premium life insurance (except term insurance) that we are offering on the conversion date for the Insured's Age, sex and amount of insurance converted. If this Policy has a rider limiting the Policy, the same or similar rider will be included in the new Policy. Other benefit riders can be added to the new Policy only if we agree. The Incontestability and Suicide Provisions in the new Policy will be measured from the date of this Policy.

DEATH BENEFIT. The death benefit of the new Policy may not be greater than the death benefit of this Policy at time of conversion, or less than the minimum amount we then issue on the new Policy You request.

PREMIUMS. The premiums for the new Policy will be in the same premium class as this Policy. They will also be based on our rates for the new Policy in effect on the conversion date. The new Policy will not take effect until the first premium is paid. This premium is due on the conversion date. If premiums for the insurance converted under this Policy have been paid beyond the conversion date, we will apply the excess to the new Policy.

CONVERSION WHILE DISABLED. If this Policy has a waiver of premium benefit and the Insured is disabled, the insurance under this Policy may be converted:

- a. on any date prior to the last conversion date with no waiver of premium benefit in the Policy, or
- b. on the last conversion date with a waiver of premium benefit in the new Policy. If converted under this part (b), the conversion may only be made to a whole life Policy with premiums payable for life. We would then waive the premiums of the new Policy in accordance with the waiver of premium benefit.

This conversion would be subject to all the rules listed above except where changed in parts (a) or (b).

BENEFICIARY OF NEW POLICY. The Beneficiary of the new Policy will be the same as the Beneficiary of this Policy on the conversion date, unless You request otherwise.

CASH VALUE PROVISIONS

CASH VALUE. The Cash Values for this policy are shown in the Policy Schedule. These values are for the end of the policy year shown and assume all premiums due have been paid. The Cash Value at any time during a policy year depends on the amount of actual premiums paid on this policy, including any riders on the life of the Insured, minus any premiums waived under a waiver of premium rider.

Any time before the Expiration Date, while this policy is in force, this policy may be surrendered for its cash value. The surrender will be effective on the date we receive the request in writing.

NONFORFEITURE OPTIONS. Nonforfeiture benefits equal to the cash value are provided if a premium remains unpaid at the end of the grace period. The following nonforfeiture options are available:

1. **Cash.** We will pay you the cash value on surrender of the policy. We will require written request and return of the policy. If the policy has been lost or destroyed, we will require a certification to that effect on a form we accept.
2. **Extended Term Insurance.** The policy may be continued as nonparticipating extended term insurance. It will be for a level amount equal to the Insurance Amount. It will be extended from the due date of the premium in default for the period that the cash value will purchase when applied as a net single premium. Purchase will be at the Insured's attained age on the due date of the premium in default. The extended term insurance will not include any benefits provided by riders.
3. **Reduced Paid-Up Insurance.** The policy may be continued at the option of the insured as reduced paid-up life insurance, the amount of which shall be as much as the surrender value of the policy will provide on the date of default, calculated using the surrender value of the policy as a net single premium on the due date of the first unpaid premium at the then-current age of the insured. The reduced paid-up insurance will not include any benefits provided by riders.

If no option is elected in writing within 60 days after the due date of any unpaid premium, the extended term insurance option will apply. Any extended term insurance may be surrendered at any time for its cash value. The cash value for extended term insurance is equal to the net single premium for the insurance remaining. Within 30 days after a policy anniversary, the cash value will not be less than on the anniversary. We may defer payment of any cash value for up to six months.

BASIS OF COMPUTATION. The Cash Values equal or exceed values computed in accordance with the Standard Nonforfeiture Method using age last birthday, semi-continuous functions and the mortality tables and interest rates shown on page 4. All policy values are determined in accordance with the laws of the state in which this policy is delivered. All policy values equal or exceed the minimum values required by law. A detailed statement of the method of computing policy values has been filed with the state in which this policy is delivered.

ACTUARIAL RESERVES. The actuarial reserve calculations are based on the Net Level Valuation Method using the Mortality Table, and interest as shown in the Schedule. The actuarial reserves are equal to or greater than those required by the law of the state in which this Policy is delivered.

OWNER AND BENEFICIARY PROVISIONS

OWNER. The Owner of this policy is the Insured, unless otherwise stated in the application or changed as provided below. The Owner may, while the Insured is living, exercise every right in this policy. If the Owner dies before the Insured and there is no contingent Owner, ownership passes to the Insured.

BENEFICIARY. The beneficiary is named in the application and may be changed by the Owner as provided below. The beneficiary will receive the proceeds when the Insured dies. If two or more persons are named, those surviving the Insured will share equally unless otherwise stated. If no beneficiary survives the Insured, any proceeds will be payable to you or your estate.

OWNER AND BENEFICIARY CHANGE. Unless this policy states otherwise, the Owner may change the Owned and beneficiary during the Insured's lifetime. However, the Owner can not change a beneficiary that was named irrevocably, unless such beneficiary agrees in writing to any proposed change. Any change must be received at our Home Office in a written form satisfactory to us. We may require return of the policy for endorsement for any change in the Owner or beneficiary. A change will take effect on the date the request was signed, but it will not apply to any payments made by us before the request was received and recorded.

PAYMENT OF BENEFIT

LUMP SUM

We will pay the death benefit in a lump sum (cash), unless otherwise agreed. We will pay the benefit at our home office. This Policy must be turned in to us when we pay the benefit. If no benefit survives, this Policy will terminate and will no longer be in effect upon such surrender.

INTEREST ON PAYMENT

We will add interest to our one sum payment. We will figure the interest from the date of the insured's death until the date of our payment. The interest rate will be 3% per year, or if greater, the interest rate, if any, required by law in the state where this Policy was issued.

GENERAL PROVISIONS

ENTIRE CONTRACT. This policy and the attached copy of the application make up the entire contract. All statements in the application are deemed, in the absence of fraud, to be representations and not warranties. No statement will be used to void this policy or defend against a claim unless it is contained in the application.

Only our President or Secretary may change or waive any provisions of this policy. Any change or waiver must be in writing. We will not be bound by any promises or representations made by or to any other persons.

INCONTESTABILITY. We will not contest the validity of this policy after it has been in force during the Insured's lifetime for two years from the Policy Date, except for nonpayment of premiums.

Any reinstatement for which we require an application showing insurability will be incontestable after the policy has been in force during the Insured's lifetime for two years from the effective date of reinstatement. Any contest of a reinstatement will be based on the application for reinstatement.

SUICIDE. If the Insured dies by suicide, while sane or insane, within two years from the Policy Date, our liability will be limited to the premiums paid.

REINSTATEMENT. If this policy lapses because a premium was not paid, it may be reinstated subject to the following conditions:

1. The request for reinstatement must be made in writing before the Expiration Date and within five years after the date the first unpaid premium was due.
2. You must provide evidence that the Insured continues to be insurable by our standards.
3. All overdue premiums must be paid with interest at the rate of 6 percent per year compounded annually from their due dates.
4. The reinstatement will be effective when we approve it.

MISSTATEMENT OF AGE OR SEX. If the Insured's age or sex has been misstated, the Insurance Amount will be those that the premiums paid would have purchased had the Insured's age and sex been correctly stated.

ASSIGNMENT. You may assign this policy absolutely or as collateral, but we will not be bound by an assignment unless it is in writing and we have received it. Your rights and those of any other person referred to in this policy will be subject to the assignment. We will not be responsible for the validity of any assignment.

NONPARTICIPATING. This policy does not share in our profits or surplus.

CONSIDERATION. The policy is issued in consideration of the application and the payment of premiums.

**CONVERTIBLE LEVEL TERM LIFE INSURANCE POLICY
WITH CASH VALUES AND GUARANTEED LEVEL PREMIUMS
PAYABLE DURING INSURED'S LIFETIME TO EXPIRATION DATE
NONPARTICIPATING**

SERFF Tracking Number: LBLI-127134081 State: Arkansas
 Filing Company: Liberty Bankers Life Insurance Company State Tracking Number: 48587
 Company Tracking Number:
 TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
 Fixed/Indeterminate Premium - Single Life
 Product Name: NEWTERM
 Project Name/Number: NEWTERM/

Supporting Document Schedules

Item Status: **Status Date:**

Satisfied - Item: Flesch Certification

Comments:

Attachments:

AR CERTIFICIATION.pdf
 Readability Certification-AR.pdf

Item Status: **Status Date:**

Satisfied - Item: Application

Comments:

Application Form LBL-WL-APP (0307) was previously approved on 6/4/07 with your Department and will be used with this product. LBL APP REINSTATE(0806)-AR is the reinstatement application for this product and was previously approved by your Department on 1/5/07.

Item Status: **Status Date:**

Satisfied - Item: Additional Schedule Pages

Comments:

Attachment:

Additional Schedule Pages.pdf

CERTIFICATION

Company Name: Liberty Bankers Life Insurance Company

I hereby certify that the forms included in this submission and company procedures meet the requirements of Regulation 19, 49, and AR 23-79-138 as well as all applicable requirements of the Arkansas Insurance Department.



Chad Leiding
Vice President Compliance

4/19/11

Date

READABILITY CERTIFICATION

COMPANY NAME Liberty Bankers Life Insurance Company NAIC CO# 68543

FORM NUMBER

FLESCH SCORE

LBL TERM-0211-AR

54.9



Signature of Insurance Company Officer

Vice President Compliance
Typed Name and Title

April 19, 2011
Date

POLICY SCHEDULE

BENEFITS AND PREMIUMS

BASE POLICY [10] YEAR LEVEL TERM POLICY	ANNUAL PREMIUM [\$179.00]	YEARS PAYABLE [10]
ADDITIONAL BENEFITS PROVIDED BY RIDER		
AD&D W CC RIDER [\$35,000]	[\$35.00]	[10]
CHILD RIDER [2 UNITS]	[\$75.46]	[10]
GRANDCHILD RIDER - \$7,500	[\$12.97]	[10]
WAIVER OF PREMIUM RIDER	[\$18.15]	[10]

TOTAL ANNUAL PREMIUM [320.58]

PREMIUM PAYMENT METHOD: [ANNUAL]

THE TOTAL PREMIUM MAY BE PAID AS FOLLOWS:

ANNUAL [\$320.58]	SEMI-ANNUAL [\$163.50]	QUARTERLY [\$84.95]	MONTHLY [\$29.65]
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POLICY DATA

INSURED:	[JOHN P. DOE]	POLICY NUMBER:	[0000000]
OWNER:	[JOHN P. DOE]	POLICY DATE	[JULY 1, 2011]
INSURED'S AGE, SEX:	[35], [MALE]	INSURANCE AMOUNT:	[\$100,000.00]
PREMIUM CLASS:	[NON TOBACCO]	TERM	[10] YEARS
AGENT ID:	[00001]	EXPIRATION DATE	[JUNE 30, 2021]
PLAN:	[10]YEAR TERM	CONVERSION DATE:	[JUNE 30, 2016]
BENEFICIARY:	[JANE DOE]		

POLICY SCHEDULE
POLICY # 0000000

CASH VALUE TABLE

POLICY YEAR	ENDING CASH VALUE	EXTENDED TERM INSURANCE		RPU AMOUNT
		YEARS	DAYS	
1	0	0	0	0
2	0	0	0	0
3	0	0	0	0
4	0	0	0	0
5	0	0	0	0
6	0	0	0	0
7	0	0	0	0
8	0	0	0	0
9	0	0	0	0
10	0	0	0	0

The Cash Values above are for the end of the policy year shown and assume all premiums due have been paid. The Cash Value at any time during a policy year depends on the amount of actual policy and rider premiums paid on the life of the Insured.

COMPUTATION TABLES AND INTEREST RATES. Cash Values and Reserves are based on Mortality Table: 2001 CSO age last birthday, Male/Female, Smoker/Nonsmoker, Select & Ultimate

Reserve Method: Net Level Valuation Method

Interest rate for reserves: [4%] all years

Interest rate for cash values: [5%] all years

POLICY SCHEDULE

BENEFITS AND PREMIUMS

BASE POLICY [15] YEAR LEVEL TERM POLICY	ANNUAL PREMIUM [\$205.00]	YEARS PAYABLE [15]
ADDITIONAL BENEFITS PROVIDED BY RIDER		
AD&D W CC RIDER [\$35,000]	[\$35.00]	[15]
CHILD RIDER [2 UNITS]	[\$75.46]	[15]
GRANDCHILD RIDER - \$7,500	[\$12.97]	[15]
WAIVER OF PREMIUM RIDER	[\$19.71]	[15]

TOTAL ANNUAL PREMIUM [348.14]

PREMIUM PAYMENT METHOD: [ANNUAL]

THE TOTAL PREMIUM MAY BE PAID AS FOLLOWS:

ANNUAL [\$348.14]	SEMI-ANNUAL [\$177.55]	QUARTERLY [\$92.26]	MONTHLY [\$32.20]
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POLICY DATA

INSURED:	[JOHN P. DOE]	POLICY NUMBER:	[0000000]
OWNER:	[JOHN P. DOE]	POLICY DATE	[JULY 1, 2011]
INSURED'S AGE, SEX:	[35], [MALE]	INSURANCE AMOUNT:	[\$100,000.00]
PREMIUM CLASS:	[NON TOBACCO]	TERM	[15] YEARS
AGENT ID:	[00001]	EXPIRATION DATE	[JUNE 30, 2026]
PLAN:	[15]YEAR TERM	CONVERSION DATE:	[JUNE 30, 2021]
BENEFICIARY:	[JANE DOE]		

POLICY SCHEDULE
POLICY # 0000000

CASH VALUE TABLE

POLICY YEAR	ENDING CASH VALUE	EXTENDED TERM INSURANCE		RPU AMOUNT
		YEARS	DAYS	
1	0	0	0	0
2	0	0	0	0
3	0	0	0	0
4	0	0	0	0
5	0	0	0	0
6	0	0	0	0
7	0	0	0	0
8	0	0	0	0
9	0	0	0	0
10	0	0	0	0
11	40	0	68	4,300
12	73	0	110	9,500
13	78	0	105	14,100
14	54	0	66	18,100
15	0	Expired		0

The Cash Values above are for the end of the policy year shown and assume all premiums due have been paid. The Cash Value at any time during a policy year depends on the amount of actual policy and rider premiums paid on the life of the Insured.

COMPUTATION TABLES AND INTEREST RATES. Cash Values and Reserves are based on Mortality Table: 2001 CSO age last birthday, Male/Female, Smoker/Nonsmoker, Select & Ultimate

Reserve Method: Net Level Valuation Method

Interest rate for reserves: [4%] all years

Interest rate for cash values: [5%] all years

POLICY SCHEDULE

BENEFITS AND PREMIUMS

BASE POLICY [30] YEAR LEVEL TERM POLICY	ANNUAL PREMIUM [\$346.00]	YEARS PAYABLE [30]
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ADDITIONAL BENEFITS PROVIDED BY RIDER

AD&D & CC RIDER [\$35,000]	[\$35.00]	[30]
CHILD RIDER [2 UNITS]	[\$75.46]	[30]
GRANDCHILD RIDER - \$7,500	[\$12.97]	[30]
WAIVER OF PREMIUM RIDER	[\$28.17]	[30]

TOTAL ANNUAL PREMIUM [\$497.60]

PREMIUM PAYMENT METHOD: [ANNUAL]

THE TOTAL PREMIUM MAY BE PAID AS FOLLOWS:

ANNUAL [\$497.60]	SEMI-ANNUAL [\$253.78]	QUARTERLY [\$131.86]	MONTHLY [\$46.03]
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POLICY DATA

INSURED:	[JOHN P. DOE]	POLICY NUMBER:	[0000000]
OWNER:	[JOHN P. DOE]	POLICY DATE	[JULY 1, 2011]
INSURED'S AGE, SEX:	[35], [MALE]	INSURANCE AMOUNT:	[\$100,000.00]
PREMIUM CLASS:	[NON TOBACCO]	TERM	[30] YEARS
AGENT ID:	[00001]	EXPIRATION DATE	[JUNE 30, 2041]
PLAN:	[30]YEAR TERM	CONVERSION DATE:	[JUNE 30, 2036]
BENEFICIARY:	[JANE DOE]		

POLICY SCHEDULE
POLICY # 0000000
CASH VALUE TABLE

POLICY YEAR	ENDING CASH VALUE	EXTENDED TERM INSURANCE		RPU AMOUNT
		YEARS	DAYS	
1	0	0	0	0
2	0	0	0	0
3	0	0	0	0
4	0	0	0	0
5	52	0	172	1,000
6	344	2	241	6,000
7	637	4	75	10,800
8	931	5	102	15,300
9	1,224	6	20	19,600
10	1,514	6	235	23,700
11	1,796	7	27	27,500
12	2,068	7	130	31,200
13	2,326	7	186	34,500
14	2,569	7	200	37,800
15	2,796	7	178	40,800
16	3,009	7	128	43,700
17	3,203	7	52	46,600
18	3,373	6	318	49,300
19	3,513	6	188	51,900
20	3,617	6	39	54,500
21	3,674	5	235	56,900
22	3,676	5	53	59,100
23	3,617	4	219	61,400
24	3,488	4	11	63,500
25	3,283	3	152	65,700
26	2,937	2	286	67,600
27	2,461	2	45	69,400
28	1,828	1	158	71,000
29	1,015	0	265	72,500
30	0	Expired		0

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Reserve Method: Net Level Valuation Method

Interest rate for reserves: [4%] all years

Interest rate for cash values: [5%] all years