PURELIFE-PLUS

Flexible Premium Life Insurance to Age 121

Portable, Permanent Individual Life Insurance for the Employee and Family

Policy Form: ICC18-PRFNG-NI-18

Product Highlights

Permanent Life Insurance to Age 121

Minimal Cash Value Premiums Dedicated Primarily to Purchase Life Insurance

> Level Premium Guarantees Coverage for a Significant Period of Time

Unique Limited Right to Partial Refund of Premium if Future Premium Required to Continue Coverage Increases

No Surrender Charges Apply

Accelerated Death Benefit Due to Terminal Illness Included

Convenient Premium Payments Through Payroll Deduction

> Portable When You Leave Employment

Accidental Death Benefit Included for Selected Ages

Accelerated Death Benefit Due to Chronic Illness Included **For Employee and Spouse Only** For the eligible employees of

PERRIN-WHITT CONSOLIDATED ISD

Marketed by



Application for Life Insurance Express Issue | Monthly Pay

FOR USE ONLY IN

Texas

Portable, Permanent, Individual Life Insurance for Employees and Their Families

As an employee, you can apply for valuable life insurance protection on you and your family under eligibility guidelines established for your employer. Your employer has conveniently agreed to permit you to pay premiums through payroll deduction. This is a summary only. Policy provisions prevail. This brochure is not a contract or an offer to contract.

Minimal Cash Values Buy this policy for its life insurance protection, not its cash value. The primary benefit is life insurance. Payment of the Table Premium produces a small cash value (Benchmark Cash Value).

Permanent Life Insurance Coverage Unlike group term life insurance, PureLife-plus is a personally owned, permanent individual life insurance policy to age 121 that can never be canceled or reduced as long as you pay the necessary premiums, even if your health changes.

Guaranteed Period Continuous, timely, and uninterrupted payment of the Table Premium guarantees coverage for the Guaranteed Period shown. Texas Life (We) cannot legally predict the premium required to continue coverage after the Guaranteed Period. It may be lower, the same, or higher than the Table Premium. However, if the premium to continue coverage is ever higher, We guarantee a limited right to a partial refund of premium (described below).

Guaranteed Limited Right to Partial Refund of Premium If a premium higher than the Table Premium is ever required to continue coverage after the Guaranteed Period, you have the choice to:

- a. Pay the higher premium(s) required to continue coverage; or,
- b. Surrender the policy and receive a partial refund of premium equal to 120 times the minimum monthly premium due at issue (ten years worth of Table Premium). You are eligible for this refund if the actual cash value equals or exceeds the Benchmark Cash Value and you have taken no prior partial surrenders.

Portable Once issued, continued employment is not a condition to continue coverage. Coverage is guaranteed as long as required premiums are paid, even after you retire or terminate employment. When employment ends, you can pay equivalent monthly premiums directly or by bank draft (for monthly direct payments we add a monthly fee not to exceed \$2.00). Other modes are available.

Accelerated Death Benefit Due to Terminal Illness Rider This policy includes, at no additional premium, an Accelerated Death Benefit Due to Terminal Illness Rider (Form ICC07-ULABR-07). See details on next page.

Individual and Family Coverage is Easy to Apply For Subject to age and amount restrictions, you may apply for an individual policy on your life or your spouse's life (see chart next page for spouse's minimum/maximum amounts). An individual policy is

also available on each of your children ages 15 days - 26, and even on each of your grandchildren ages 15 days - 18. Proof of insurability is required. Most policies are issued based upon the answers to three work and health related application questions.

Optional Benefits According to the guidelines established for your employer, your application will include the following benefit for an additional cost depending upon your issue age.

Accidental Death Benefit This benefit to age 65 (Issue Ages 17-59) doubles the coverage when death occurs by accidental bodily injury within 180 days of an accident. Maximum in-force limits and exclusions apply. (Form ICCO7-ULCL-ADB-07).

Accelerated Death Benefit Rider For Chronic Illness For Employee and Spouse Only This benefit provides an accelerated death benefit if an insured becomes chronically ill as defined in the rider. (Form ICC15-ULABR-CI-15). See details on next page.

Interim Insurance: Interim insurance will be in force on the application date if these conditions are met: (1) the insurance is purchased through payroll deduction; (2) the Salary Deduction Authorization is signed; and, (3) the proposed insured is insurable at standard rates under Our rules and usual practice. Interim insurance remains in effect until the earlier of: (a) the Policy Date; (b) the date We decline the application; (c) the date We notify the applicant that s/he is ineligible for interim insurance; or, (d) the 180th day after the application date.

Policy Mechanics and Other Important Details Premiums are flexible. However, we highly recommend payment of the Table Premium during the Guaranteed Period, and no partial surrenders or policy loans. Table Premium produces a small cash value (Benchmark Cash Value). Paying a lesser premium results in an actual cash value which is less than Benchmark Cash Value, causing the policy to lapse. Premiums less a premium load create cash value to pay monthly administrative loads and cost of insurance. Cash value is currently credited at the quaranteed interest rate of 2.00% per year. We may, at any time, credit higher than the guaranteed interest rate. Likewise, We may charge cost of insurance rates which are less than the policy's maximum rates, but only when actual cash value equals or exceeds Benchmark Cash Value. No surrender charges apply. Loads include 10.00% of premium, \$2.03 per month and monthly administrative loads. Two year suicide and contestable clauses apply. The policy loan rate is 7.40% in advance. Surrenders and loans may be deferred for up to six months.



A Summary of the Accelerated Death Benefit Rider

Terminal Illness - included at no additional cost

The policy includes an Accelerated Death Benefit Due to Terminal Illness Rider. If the Insured has a terminal illness, in lieu of the insurance proceeds otherwise payable at death, you may elect to claim an accelerated benefit while the Insured is still alive. The single sum benefit is 92% of the insurance proceeds less an administrative fee of the lesser of \$150 or 7% of the insurance proceeds. Terminal Illness is an injury or sickness diagnosed and certified by a qualifying physician that, despite the appropriate medical care, is reasonably expected to result in death within 12 months. This benefit is intended to qualify for favorable income tax treatment and may not be subject to federal income tax. (See Important Notices below.)

Chronic Illness - included with an additional premium

For an additional premium of 10% of the base policy premium, this policy may include an Accelerated Death Benefit Due to Chronic Illness Rider. If the Insured has a chronic illness, in lieu of the insurance proceeds otherwise payable at death, you may elect to claim an accelerated benefit while the Insured is still alive. The single sum benefit is 92% of the insurance proceeds less an administrative fee of the lesser of \$150 or 7% of the insurance proceeds. Chronic Illness means the Insured permanently: (a) is unable to perform, without substantial assistance from another individual, at least two Activities of Daily Living due to a loss of functional capacity and will need services for the rest of his or her life; or (b) requires substantial supervision to protect the Insured from threats to health and safety due to severe cognitive impairment and will need services for the rest of his or her life. Activities of Daily Living include: bathing, continence, dressing, eating, toileting, and transferring. Severe cognitive impairment means deterioration or loss of intellectual capacity that: (1) places the Insured in jeopardy of harming himself or herself or others, and therefore, the Insured requires substantial supervision by another person; and (2) is measured by clinical evidence and standardized tests which reliably measure impairment in: (a) short or long term memory; (b) orientation to people, places or time; and (c) deductive or abstract reasoning.

This benefit will be calculated and paid as a lump sum only. This lump sum is intended to serve as a per diem accelerated death benefit as described under Section 101(g) of the Internal Revenue Code. You may be able to exclude certain portions of this accelerated death benefit (specifically, the greater of: (a) the lump sum equivalent of the per diem amount; or (b) the actual cost incurred for Services provided in the year the Accelerated Death Benefit is paid) from your taxable income. Your benefit for Chronic Illness will be calculated in accordance with the rider and you may, in some circumstances, be paid more than the excludable per diem amount.

Important Notices

Tax laws related to the acceleration of life insurance benefits are complex. The information presented in this Summary is general in nature. You should consult a qualified tax or legal advisor to determine the effect of receiving this benefit. Texas Life Insurance Company and its agents do not provide tax or legal advice.

Receipt of any accelerated death benefit under your policy may affect your, your spouse's and your family's eligibility for medical assistance (Medicaid), Aid to Families with Dependent Children (AFDC), Supplemental Social Security Income (SSI), and drug assistance programs. You should consult with a qualified tax or legal advisor and the relevant social service agencies to determine how receiving the benefit may affect your, your spouse's, and your family's eligibility for public assistance.

An accelerated death benefit is not long term care insurance. This summary provides a general description of any accelerated death benefit under your policy. Your policy and riders contain certain exclusions, limitations, and exceptions. Please refer to your policy and rider for details. The right to accelerate benefits under any accelerated death benefit does not extend to any Child Term Life Insurance Rider. However, if the accelerated death benefit under any rider is paid, any coverage provided under the Child Term Life Insurance Rider attached to this policy becomes a paid up term insurance policy on each covered child.

This paid up coverage on each child will terminate on each covered child's 25th birthday. Payment under any accelerated death benefit rider terminates the policy and all other optional benefits/riders and reduces all insurance proceeds, cash values and loan values to zero.

18P061 PLP18 CI R03/23

Representation of benefit payable - Terminal or Chronic Illness

The following chart shows the effect of exercising an accelerated benefit on the base policy. This example is using a \$50,000 policy with a \$2,000 policy loan balance and all premiums are current. This chart is for representation purposes only. Your benefits may be higher or lower, depending on your face amount of coverage, any unpaid policy loan balance, and any overdue premiums.

		Terminal Illness		Chronic Illness
Death Benefit		\$50,000		\$50,000
Policy Loan Balance	-	\$2,000	-	\$2,000
Available for Acceleration	=	\$48,000	=	\$48,000
Acceleration Percentage	х	92%	X	92%
Gross Benefit	=	\$44,160	=	\$44,160
Administration Fee	-	\$150	-	\$150
Overdue Premiums	-	\$0	-	\$0
Accelerated Benefit Payable	=	\$44,010	=	\$44,010

Note: The benefit will be paid for either Terminal Illness or Chronic Illness. In no instance will benefits be paid under both riders.

OPTIONAL BENEFITS MONTHLY COST:

EXPRESS ISSUE AMOUNTS OF COVERAGE AVAILABLE ON SPOUSE

Spouse's Issue Age	Minimum Face Amount	Maximum Face Amount
17-34	\$25,000	\$50,000
35-39	15,000	50,000
40-49	10,000	50,000
50-60	10,000	25,000
61 & Older	N/A	N/A

MONTHLY ADMINISTRATIVE LOADS PER \$1,000 OF FACE AMOUNT FOR ISSUE AGES SHOWN (NON-TOBACCO CLASS)

Issue Age \longrightarrow	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Highest Load	0.2417	0.2425	0.2517	0.2517	0.2525	0.2617	0.2617	0.2617	0.2617	0.2700	0.2692	0.2767	0.2725	0.2659	0.2559
Lowest Load	0.1117	0.1075	0.0750	0.0825	0.0900	0.0625	0.0717	0.0825	0.0950	0.0734	0.0934	0.0825	0.1184	0.1659	0.2225
Zero After Year	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
Issue Age \longrightarrow	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Highest Load	0.2459	0.2334	0.2284	0.2267	0.2275	0.2275	0.2375	0.2450	0.2584	0.2684	0.2700	0.2884	0.2984	0.2984	0.3075
Lowest Load	0.0434	0.0884	0.1200	0.1375	0.1534	0.1675	0.1392	0.1442	0.1017	0.0600	0.0625	0.2717	0.2542	0.2767	0.2675
Zero After Year	6	6	6	6	6	6	6	6	6	6	6	5	5	5	5
Issue Age \longrightarrow	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
Highest Load	0.3134	0.3100	0.3309	0.3409	0.3575	0.3842	0.3900	0.4084	0.4292	0.4700	0.5084	0.5650	0.6300	0.6892	0.7475
Lowest Load	0.2675	0.0175	0.2650	0.2575	0.2225	0.1492	0.1492	0.1025	0.0575	0.4134	0.3359	0.2075	0.0542	0.6325	0.5659
Zero After Year	5	6	5	5	5	5	5	5	5	4	4	4	4	3	3
Issue Age \longrightarrow	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59
Highest Load	0.8059	0.8717	0.9275	0.9817	1.0534	1.1334	1.2250	1.3242	1.3934	1.4625	1.5400	1.6109	1.6992	1.7775	1.8592
Lowest Load	0.5009	0.4242	0.3692	0.3225	0.2434	0.1584	0.0517	1.2900	1.3067	1.3275	1.3459	1.3767	1.3959	1.4334	1.4750
Zero After Year	3	3	3	3	3	3	3	2	2	2	2	2	2	2	2
												_			
Issue Age \longrightarrow	60	61	62	63	64	65	66	67	68	69	70				
Highest Load	1.9625	2.0392	2.1359	2.2250	2.3200	2.4275	2.5492	2.6817	2.8242	2.9534	3.0742				
Lowest Load	1.5034	1.5684	1.6225	1.6950	1.7725	1.8500	1.9267	2.0075	2.0142	1.8775	1.7492				
Zero After Year	2	2	2	2	2	2	2	2	2	2	2				

MONTHLY ADMINISTRATIVE LOADS PER \$1,000 OF FACE AMOUNT FOR ISSUE AGES SHOWN (TOBACCO CLASS)

Issue Age \longrightarrow	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Highest Load	0.4084	0.4059	0.4042	0.4025	0.4175	0.4242	0.4475	0.4650	0.4659	0.4850	0.4934	0.5017	0.5092	0.5950	0.5892
Lowest Load	0.1700	0.1967	0.2242	0.2525	0.2300	0.2359	0.1884	0.1642	0.1917	0.1642	0.1692	0.1759	0.1892	0.5725	0.0217
Zero After Year	4	4	4	4	4	4	4	4	4	4	4	4	4	3	4
Issue Age \longrightarrow	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
Highest Load	0.6092	0.6100	0.6092	0.6625	0.6775	0.7284	0.7400	0.7925	0.8725	0.9342	1.0142	1.1242	1.1750	1.2500	1.3034
Lowest Load	0.0025	0.0417	0.0884	0.6484	0.6600	0.6217	0.6575	0.6092	0.5092	0.4475	0.3492	0.1934	0.1659	0.0942	0.0692
Zero After Year	4	4	4	3	3	3	3	3	3	3	3	3	3	3	3
Issue Age \longrightarrow	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61
Highest Load	1.3734	1.4325	1.5242	1.5942	1.6609	1.7675	1.8542	1.9250	1.9992	2.0842	2.1617	2.2392	2.3067	2.3700	2.4659
Lowest Load	0.0159	1.4175	1.4642	1.4984	1.5425	1.5534	1.5909	1.6517	1.7184	1.7825	1.8634	1.9542	2.0659	2.1934	2.2992
Zero After Year	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2
										-					
Issue Age \longrightarrow	62	63	64	65	66	67	68	69	70						
Highest Load	2.5392	2.6009	2.6484	2.7000	2.7609	2.8300	2.8967	2.9625	3.0192						
Lowest Load	2.3167	2.2509	2.2000	2.1442	2.0800	2.0059	1.9350	1.8642	1.8034						
Zero After Year	2	2	2	2	2	2	2	2	2						

TEXASLIFE INSURANCE COMPANY

PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

	ruie	acco —	Express issue							
										GUARANTEED
		Monthly	y Premiu	ms for Li	ife Insura	ance Face	Amount	s Shown		PERIOD
				Includ	les Added (Cost for				Age to Which
Issue			A	ccidental D	eath Benefi	t (Ages 17-	59)			Coverage is
Age		ar	nd Accelera	ted Death	Benefit for	Chronic Illi	ness (All Ag	ges)		Guaranteed at
(ALB)	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	Table Premium
15D-1	,	, ,	, ,	,	, ,	,		,	,	81
2-4										80
5-8										79
9-10										79
11-16										77
17-20		13.05	23.85	34.65	45.45	67.05	88.65	110.25	131.85	75
21-22		13.33	24.40	35.48	46.55	68.70	90.85	113.00	135.15	74
23 24-25		13.60 13.88	24.95 25.50	36.30 37.13	47.65 48.75	70.35 72.00	93.05 95.25	$115.75 \\ 118.50$	138.45 141.75	75 74
26		13.88	26.60	38.78	50.95	75.30	99.65	124.00	141.75	74 75
27-28		14.43 14.70	27.15	39.60	52.05	76.95	101.85	124.00 126.75	151.65	73 74
29		14.70	27.70	40.43	53.15	78.60	104.05	129.50	154.95	74
30-31		15.25	28.25	41.25	54.25	80.25	106.25	132.25	158.25	73
32		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	74
33		16.63	31.00	45.38	59.75	88.50	117.25	146.00	174.75	74
34		17.45	32.65	47.85	63.05	93.45	123.85	154.25	184.65	75
35		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	76
36		19.10	35.95	52.80	69.65	103.35	137.05	170.75	204.45	76
37		19.93	37.60	55.28	72.95	108.30	143.65	179.00	214.35	77
38		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	77
39	10 ==	22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	78
40 41	10.75 11.52	23.50 25.43	44.75 48.60	66.00	87.25 94.95	129.75 141.30	172.25 187.65	214.75 234.00	257.25 280.35	79 80
41	12.40	25.45 27.63	53.00	71.78 78.38	103.75	154.50	205.25	254.00 256.00	306.75	81
43	13.17	29.55	56.85	84.15	111.45	166.05	220.65	275.25	329.85	82
44	13.94	31.48	60.70	89.93	119.15	177.60	236.05	294.50	352.95	83
45	14.71	33.40	64.55	95.70	126.85	189.15	251.45	313.75	376.05	83
46	15.59	35.60	68.95	102.30	135.65	202.35	269.05	335.75	402.45	84
47	16.36	37.53	72.80	108.08	143.35	213.90	284.45	355.00	425.55	84
48	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	85
49	18.12	41.93	81.60	121.28	160.95	240.30	319.65	399.00	478.35	85
50	19.22	44.68	87.10	129.53	171.95					86
51	20.54	47.98	93.70	139.43	185.15					87
52 52	21.97	51.55	100.85	150.15	199.45					88
53 54	23.07 24.17	54.30 57.05	106.35 111.85	$158.40 \\ 166.65$	210.45 221.45					88 88
55	25.38	60.08	117.90	175.73	233.55					89
56	26.48	62.83	123.40	183.98	244.55					89
57	27.80	66.13	130.00	193.88	257.75					89
58	29.01	69.15	136.05	202.95	269.85					89
59	30.33	72.45	142.65	212.85	283.05					89
60	31.18	74.58	146.90	219.23	291.55					90
61	32.61	78.15	154.05	229.95	305.85					90
62	34.37	82.55	162.85	243.15	323.45					90
63	36.13	86.95	171.65	256.35	341.05					90
64	38.00	91.63	181.00	270.38	359.75					90
65 ee	40.09	96.85	191.45	286.05	380.65					90
66 67	42.40 44.93									90 91
68	44.93 47.68									91 91
69	50.43									91
70	53.29									91
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TEXASLIFE INSURANCE COMPANY

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

	1	GUARANTEED								
		Monthly	7 Premiu	ms for Li	ife Incurs	nce Face	Amount	s Shown		PERIOD
		Monthly	y I I CIIII u		les Added (Aillouile	Sillowii		Age to Which
Issue			Δ			t (Ages 17-	50)			Coverage is
Age		or				, -	ness (All Ag	roc)		Guaranteed at
(ALB)	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	Table Premium
(ALB) 15D-1	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$500,000	81
2-4										80
5-8										79
9-10										79
11-16										77
17-20		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	71
21-22		19.38	36.50	53.63	70.75	105.00	139.25	173.50	207.75	71
23 24-25		20.20 20.75	38.15 39.25	56.10 57.75	74.05 76.25	109.95 113.25	$145.85 \\ 150.25$	181.75 187.25	$217.65 \\ 224.25$	72 71
26		21.30	40.35	59.40	78.45	116.55	154.65	192.75	230.85	72
27-28		21.85	41.45	61.05	80.65	119.85	159.05	198.25	237.45	71
29		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	71
30-31		24.88	47.50	70.13	92.75	138.00	183.25	228.50	273.75	72
32		25.70	49.15	72.60	96.05	142.95	189.85	236.75	283.65	72
33		25.98	49.70	73.43	97.15	144.60	192.05	239.50	286.95	72
34		26.25	50.25	74.25	98.25	146.25	194.25	242.25	290.25	71 70
35 36		28.18 29.00	54.10 55.75	80.03 82.50	$105.95 \\ 109.25$	157.80 162.75	209.65 216.25	$261.50 \\ 269.75$	313.35 323.25	72 72
37		30.93	59.60	88.28	116.95	174.30	231.65	289.00	346.35	73
38		31.75	61.25	90.75	120.25	179.25	238.25	297.25	356.25	73
39		33.95	65.65	97.35	129.05	192.45	255.85	319.25	382.65	74
40	16.14	36.98	71.70	106.43	141.15	210.60	280.05	349.50	418.95	76
41	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	77
42	18.34	42.48	82.70	122.93	163.15	243.60	324.05	404.50	484.95	78
43 44	19.88 20.65	46.33 48.25	90.40 94.25	134.48 140.25	$178.55 \\ 186.25$	$266.70 \\ 278.25$	354.85 370.25	443.00 462.25	531.15 554.25	80 80
45	20.05	51.00	94.25 99 <u>.</u> 75	148.50	197.25	294.75	392.25	489.75	587.25	81
46	22.63	53.20	104.15	155.10	206.05	307.95	409.85	511.75	613.65	81
47	23.73	55.95	109.65	163.35	217.05	324.45	431.85	539.25	646.65	82
48	24.72	58.43	114.60	170.78	226.95	339.30	451.65	564.00	676.35	82
49	26.15	62.00	121.75	181.50	241.25	360.75	480.25	599.75	719.25	83
50	27.36	65.03	127.80	190.58	253.35					83
51 52	28.57 30.33	68.05	133.85	199.65 212.85	265.45 283.05					83 84
52 53	30.33	$72.45 \\ 76.30$	142.65 150.35	212.85 224.40	283.05 298.45					84 85
54	33.30	79.88	157.50	235.13	312.75					85
55	34.84	83.73	165.20	246.68	328.15					85
56	36.60	88.13	174.00	259.88	345.75					85
57	38.36	92.53	182.80	273.08	363.35					86
58	40.23	97.20	192.15	287.10	382.05					86
59 60	42.10 43.28	101.88	$201.50 \\ 207.40$	301.13 309.98	400.75					86 86
61	43.28 45.81	104.83 111.15	220.05	309.98	412.55 437.85					86 86
62	48.23	117.20	232.15	347.10	462.05					87
63	50.65	123.25	244.25	365.25	486.25					87
64	53.07	129.30	256.35	383.40	510.45					87
65	55.71	135.90	269.55	403.20	536.85					87
66	58.57									88
67 68	61.65									88
68 69	64.84 68.25									88 88
70	71.88									89
				J						

TEXASLIFE INSURANCE COMPANY

PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

	ruie	Liie-piu	5 — Jiai	1111 5 — 1 4	011-1002		xpress issue			
			_	_				. ~		GUARANTEED
		Lif	e Insurai				hly Prem	iums Sho	own	PERIOD
	Prem				Includes Ad					Age to Which
Issue	For			Accider	ntal Death I	Benefit (Age	es 17-59)			Coverage is
Age	\$10,000		and Ac	celerated D	eath Benefi	it for Chron	nic Illness (A	All Ages)		Guaranteed at
(ALB)	Face	\$18.00	\$20.00	\$24.00	\$28.00	\$30.00	\$32.00	\$35.00	\$40.00	Table Premium
15D-1										81
2-4										80
5-8										79
9-10										79
11-16		00.450	41.000	FO 940	50.007	C4 094	00.000	7F 011	07.00	77
17-20 21-22		36,453 35,561	41,088 40,068	50,348	59,607 58,127	64,234 62,642	68,866 67,156	75,811 73,928	87,385 85,215	75 74
23		34,691	39,097	49,098 47,908	56,719	61,124	65,529	73,928	83,150	75
24-25		33,871	38,173	46,775	55,377	59,678	63,979	70,431	81,186	74
26		32,337	36,445	44,663	52,875	56,982	61,089	67,249	77,516	75
27-28		31,627	35,645	43,675	51,707	55,723	59,739	65,764	75,804	74
29		30,937	34,873	42,730	50,590	54,519	58,448	64,342	74,167	74
30-31		30,289	34,135	41,827	49,520	53,366	57,212	62,981	72,597	73
32		28,482	32,098	39,331	46,565	50,181	53,803	59,220	$68,\!265$	74
33		27,392	30,870	37,827	44,783	48,261	51,740	56,957	65,656	74
34		25,907	29,195	35,774	42,352	45,642	48,931	53,864	62,089	75
35		24,157	27,221	33,359	39,494	42,563	45,629	50,231	57,899	76 76
36		23,368	26,336	32,271	38,205	41,176	44,140	48,591	56,010	76
37 38		22,278 21,284	25,107 23,987	30,764 29,392	36,422 34,798	39,251 37,501	42,078 40,203	$46,323 \\ 44,257$	53,395 51,014	77 77
39		19,812	22,328	27,359	32,390	34,906	37,424	41,192	47,484	78
40	10.75	18,530	20,883	25,589	30,295	32,648	35,001	38,530	44,412	79
41	11.52	16,991	19,150	23,461	27,778	29,936	32,093	35,330	40,720	80
42	12.40	15,518	17,488	21,430	25,370	27,340	29,312	32,267	37,193	81
43	13.17	14,424	16,255	19,919	23,581	25,413	27,244	29,991	34,570	82
44	13.94	13,474	15,187	18,606	22,028	23,739	25,449	28,016	$32,\!293$	83
45	14.71	12,641	14,246	17,456	20,667	22,272	23,877	26,285	30,298	83
46	15.59	11,807	13,306	16,305	19,303	20,803	22,303	24,551	28,299	84
47	16.36	11,163	12,580	15,415 $14,617$	18,250	19,667	21,085	23,210	26,755	84
48	17.13 18.12	10,585	11,929 11,187	13,704	17,306 16,226	18,650 17,485	19,994 18,747	22,010	25,370 23,788	85 85
50	19.12		10,459	12,817	15,174	16,353	17,531	19,299	23,788	86
51	20.54		10,100	11,892	14,078	15,173	16,266	17,906	20,640	87
52	21.97			11,030	13,058	14,072	15,087	16,607	19,144	88
53	23.07			10,447	12,368	13,326	14,290	15,731	18,132	88
54	24.17			,	11,747	12,660	13,570	14,940	17,221	88
55	25.38				11,133	11,997	12,863	14,161	16,321	89
56	26.48				10,628	11,453	12,279	13,517	15,579	89
57	27.80				10,077	10,862	11,644	12,819	14,776	89
58 50	29.01 30.33					10,370	11,118	12,239	14,107	89
59 60	30.33 31.18						10,594 $10,284$	11,664 $11,321$	13,444 $13,049$	89 90
61	32.61						10,204	10,788	12,435	90
62	34.37							10,196	11,753	90
63	36.13							.,	11,143	90
64	38.00		7						10,560	90
65	40.09		4							90
66	42.40									90
67	44.93									91
68	47.68									91
69	50.43									91
70	53.29									91

TEXASLIFE INSURANCE EMPLOYEE/SPOUSE MONTHLY PREMIUMS

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

Prem		1		, p. a.s	Janaa	II GE IKIDIK	1401011	<u> </u>			GUARANTEED
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Same Face Sample Sampl			Lil	e insurai				-	iums 5nc	own	
Age	_										
(A-1.8) Pace							, –	,			o o
1511 1								,	- /		
2-4		Face	\$26.00	\$28.00	\$30.00	\$35.00	\$40.00	\$45.00	\$50.00	\$55.00	
5-8											
9-10											
11-16											
17-20											
21-22			36,433	39,494	42,563	50,231	57,899	65,567	73,237	80,905	
24-25			,	37,590				,			
26	23		33,077	35,864	38,650	45,612	$52,\!577$	59,544	66,505	73,468	72
27-28 8 30,94 32,945 33,366 41,774 48,151 54,529 60,906 67,284 71 30-31 20,744 22,434 30,603 30,188 41,713 47,238 52,763 58,288 72 32 25,320 27,453 29,583 34,917 19,226 45,576 50,907 56,237 72 34 2,203 28,818 29,077 34,111 39,779 46,048 50,316 55,585 72 36 22,933 24,822 29,070 34,115 33,318 44,532 49,740 54,943 71 36 22,194 24,062 25,938 36,608 35,281 39,949 44,627 49,300 72 37 20,706 22,448 24,100 28,533 32,913 37,272 41,631 45,990 73 38 20,128 21,523 23,517 27,754 31,992 36,229 40,644 44,704 73											
29				,					,		
30-31			· ·	· ·	· ·				-		
32 25,320 27,453 29,583 34,917 49,246 45,076 50,907 56,237 72 34 26,618 28,907 34,115 30,318 44,627 50,807 55,585 72 35 22,903 24,832 26,760 31,500 30,404 41,224 46,047 50,807 72 37 20,766 22,488 24,190 28,533 30,904 41,224 46,047 40,007 72 38 20,128 21,823 22,190 28,553 33,913 37,722 41,631 45,900 73 38 20,128 21,823 22,517 27,754 31,992 36,229 40,644 44,704 73 40 16,14 17,099 18,539 19,978 23,575 27,181 30,778 34,378 37,658 41,601 74 41 17,13 15,962 17,306 18,660 22,002 28,370 27,181 30,778 34,497 76										,	
33											
34 22,903 24,832 28,907 34,115 33,318 44,532 49,740 54,943 71 36 22,194 24,062 25,938 30,608 35,281 39,949 44,627 49,300 72 37 20,706 22,448 24,190 28,533 32,913 37,722 41,631 45,990 73 38 20,128 21,823 23,517 27,754 31,992 36,229 40,464 44,704 73 39 18,731 20,311 21,885 25,875 27,754 31,992 36,229 40,464 44,704 73 40 16,14 17,099 18,539 19,978 23,575 27,181 30,778 34,378 37,977 76 41 17,13 15,962 17,799 18,560 22,00 25,370 28,730 32,985 35,449 77 42 18,34 14,761 16,004 17,297 20,355 23,462 26,570 29,677 <td></td>											
35 22,194 24,062 25,938 36,608 35,281 39,494 44,027 50,867 72 37 20,706 22,448 24,190 28,553 32,913 37,272 41,631 45,990 73 38 20,128 21,823 23,517 27,754 31,992 36,229 40,464 44,704 73 40 16,14 17,099 18,539 19,978 23,575 27,181 30,778 34,378 37,977 76 41 17,13 15,992 17,306 18,650 22,010 25,370 28,730 32,089 35,449 77 42 18,34 14,761 16,004 17,247 20,355 23,462 26,570 29,677 32,785 78 43 19,88 13,472 14,606 15,747 18,577 21,413 24,249 27,085 29,921 80 44 20,65 12,998 13,995 15,682 17,799 20,517 23,344			20,021								
37			22,903							,	
38 20,128 21,823 23,517 27,754 31,992 36,229 40,464 44,704 73 40 16,14 17,099 18,539 19,978 23,575 27,181 30,775 33,715 33,628 41,601 74 41 17,13 15,962 17,306 18,650 22,010 25,370 28,730 32,089 35,449 77 42 18,34 14,761 16,004 17,247 20,355 23,462 26,570 29,077 32,785 78 44 20,65 12,908 13,995 15,082 17,799 20,517 23,234 25,952 28,669 80 45 21,75 12,180 13,205 14,231 16,795 19,359 21,924 24,488 27,052 81 46 22,63 11,655 12,635 13,617 16,070 18,552 20,977 23,438 27,052 81 47 23,33 11,057 11,459 12,350	36		22,194	24,062	25,938	30,608	35,281	39,949	44,627	49,300	72
39										,	
40									-		
41 17.13 15,962 17,306 18,650 22,010 25,370 28,730 32,089 35,449 77 42 18.34 14,761 16,004 17,217 20,355 23,662 26,670 29,077 32,785 78 43 19.88 13,472 14,606 15,741 18,577 21,413 24,249 27,085 29,921 80 44 20.05 12,908 13,995 15,682 17,799 20,517 23,234 25,952 28,669 80 45 21,75 12,180 13,205 14,231 16,795 19,359 21,924 24,488 27,052 81 46 22.63 11,657 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 48 24,72 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26,15 10,570 11,459 12,350		1011									
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43 19.88 13,472 14,606 15,74f 18,577 21,413 24,249 27,085 29,921 80 44 20.65 12,908 13,995 15,682 17,799 20,517 23,234 25,952 28,669 80 45 21.75 12,180 13,205 14,231 16,795 19,359 21,924 24,488 27,052 81 46 22.63 11,655 12,635 13,617 16,070 18,524 20,977 23,430 25,884 81 47 23.73 11,057 11,489 12,919 15,247 17,575 19,903 22,230 24,558 82 48 24.72 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26.15 10,575 11,611 13,702 15,795 17,888 19,978 22,071 83 50 27.36 10,255 11,053 13,043 17,026				· ·							
44 20.65 12,908 13,995 15,082 17,799 20,517 23,234 25,952 28,669 80 45 21.75 12,180 13,205 14,231 16,795 19,359 21,924 24,488 27,052 81 46 22.63 11,655 12,635 13,617 16,775 19,903 22,230 24,558 82 48 24.72 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26.15 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26.15 10,775 11,611 13,702 15,795 17,888 19,978 22,071 83 50 27.36 10,255 11,053 13,043 15,034 17,026 19,017 21,008 83 51 28.57 10,544 12,441 14,342 16,243 18,143 20,042				·							
46 22.63 11,655 12,635 13,617 16,070 18,524 20,977 23,430 25,884 81 47 23.73 11,057 11,988 12,919 15,247 17,575 19,903 22,230 24,558 82 48 24.72 10,570 11,459 12,350 14,757 16,801 19,026 21,251 23,476 82 49 26.15 10,575 11,611 13,702 15,795 17,888 19,978 22,071 83 50 27.36 10,255 11,053 13,043 15,034 17,026 19,017 21,008 83 51 28.57 10,544 12,441 14,342 16,243 18,143 20,042 83 52 30.33 11,664 13,444 15,223 17,005 18,786 84 53 31.87 11,057 12,745 13,769 15,379 16,989 85 55 34.84 10,444 13,9				,							
47 23.73 11,057 11,988 12,919 15,247 17,575 19,903 22,230 24,558 82 48 24.72 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26.15 10,775 14,611 13,702 15,034 17,026 19,017 21,008 83 50 27.36 10,255 14,053 13,043 15,034 17,026 19,017 21,008 83 51 28.57 10,544 12,441 14,342 16,243 18,143 20,042 83 52 30.33 11,664 13,444 15,223 17,005 18,786 84 53 31.87 11,057 12,745 14,434 16,121 17,809 85 54 33.30 10,544 11,057 11,583 13,118 14,653 16,186 85 55 34.84 10,493 11,583 13,188 14,6	45		12,180	13,205	14,231	16,795	19,359	21,924	24,488	27,052	81
48 24.72 10,570 11,459 12,350 14,575 16,801 19,026 21,251 23,476 82 49 26.15 10,775 14,611 13,702 15,795 17,888 19,978 22,071 83 50 27.36 10,255 11,053 13,043 15,034 17,026 19,017 21,008 83 51 28.57 10,544 12,441 14,342 16,243 18,143 20,042 83 52 30.33 11,664 13,444 15,223 17,005 18,786 84 53 31.87 11,057 12,745 14,434 16,121 17,809 85 54 33.30 10,548 12,159 13,769 15,379 16,989 85 55 34.84 10,051 11,583 13,118 14,653 16,186 85 56 36.60 10,992 12,444 13,902 15,357 85 57 38.36								· · · · · · · · · · · · · · · · · · ·			
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50 27.36 10,255 11,053 13,043 15,034 17,026 19,017 21,008 83 51 28.57 10,544 12,441 14,342 16,243 18,143 20,042 83 52 30.33 11,664 13,444 15,223 17,005 18,786 84 53 31.87 10,548 12,159 13,769 15,379 16,989 85 54 33.30 10,548 12,159 13,769 15,379 16,989 85 55 34.84 10,051 11,583 13,118 14,653 16,186 85 56 36.60 10,090 12,444 13,902 15,357 85 57 38.36 10,453 11,839 13,224 14,609 86 58 40.23 11,256 12,572 13,890 86 69 42.10 11,419 11,638 12,856 86 61 45.81 10,385 11,472 </td <td></td> <td></td> <td>10,570</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>			10,570								
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55 34.84 10,051 11,583 13,118 14,653 16,186 85 56 36.60 10,990 12,444 13,902 15,357 85 57 38.36 10,453 11,839 13,224 14,609 86 58 40.23 11,256 12,572 13,890 86 59 42.10 10,728 11,983 13,238 86 60 43.28 10,419 11,638 12,856 86 61 45.81 10,962 12,109 86 62 48.23 10,385 11,472 87 63 50.65 10,898 87 64 53.07 87 65 55.71 88 66 58.57 88 67 61.65 88 68 64.84 88 69 68.25 88			//								
56 36.60 10,990 12,444 13,902 15,357 85 57 38.36 10,453 11,839 13,224 14,609 86 58 40.23 11,256 12,572 13,890 86 59 42.10 10,728 11,983 13,238 86 60 43.28 10,419 11,638 12,856 86 61 45.81 10,962 12,109 86 62 48.23 10,385 11,472 87 63 50.65 10,898 87 64 53.07 87 65 55.71 88 66 58.57 88 67 61.65 88 68 64.84 88 69 68.25 88								13,769	15,379	16,989	85
57 38.36 10,453 11,839 13,224 14,609 86 58 40.23 11,256 12,572 13,890 86 59 42.10 10,728 11,983 13,238 86 60 43.28 10,419 11,638 12,856 86 61 45.81 10,962 12,109 86 62 48.23 10,385 11,472 87 63 50.65 10,898 87 64 53.07 87 87 65 55.71 87 88 67 61.65 88 88 68 64.84 88 88 69 68.25 88 88					,	10,051					
58 40.23 59 42.10 60 43.28 61 45.81 62 48.23 63 50.65 64 53.07 65 55.71 66 58.57 67 61.65 68 64.84 69 68.25											
59 42.10 10,728 11,983 13,238 86 60 43.28 10,419 11,638 12,856 86 61 45.81 10,962 12,109 86 62 48.23 10,385 11,472 87 63 50.65 10,898 87 64 53.07 87 87 65 55.71 87 88 66 58.57 88 88 67 61.65 88 88 68 64.84 88 88 69 68.25 88 88							10,453				
60 43.28 10,419 11,638 12,856 86 61 45.81 10,962 12,109 86 62 48.23 10,385 11,472 87 63 50.65 10,898 87 64 53.07 10,379 87 65 55.71 87 87 66 58.57 88 67 61.65 88 68 64.84 88 69 68.25 88											
61 45.81 62 48.23 63 50.65 64 53.07 65 55.71 66 58.57 67 61.65 68 64.84 69 68.25								,			
62 48.23 63 50.65 64 53.07 65 55.71 66 58.57 67 61.65 68 64.84 69 68.25								-, -			
64 53.07 65 55.71 66 58.57 67 61.65 68 64.84 69 68.25											87
65 55.71 66 58.57 67 61.65 68 64.84 69 68.25											
66 58.57 67 61.65 68 64.84 69 68.25										10,379	
67 61.65 68 64.84 69 68.25 88											
68 64.84 69 68.25											
69 68.25 88											

TEXASLIFE INSURANCE CHILD MONTHLY PREMIUMS

PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

	Pure	Lite-piu	s — Sta	naara k	isk labi	e Premii	ums — i	Non-Tob	acco —	Express Issue
										GUARANTEED
		Monthly	y Premiu			ınce Face	Amount	s Shown		PERIOD
				Includ	les Added (Cost for				Age to Which
Issue			A	ccidental D	eath Benefi	t (Ages 17-	59)			Coverage is
Age										Guaranteed at
(ALB)	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000	Table Premium
15D-1				9.25					16.25	81
2-4				9.50					16.75	80
5-8				9.75					17.25	79
9-10				10.00					17.75	79 77
11-16 17-20				10.25 12.25					18.25 22.25	77 75
21-22				12.20					22.75	74
23				12.75					23.25	75
24-25				13.00					23.75	74
26				13.50			7		24.75	75
27-28										74
29										74
30-31										73 74
32 33										74 74
34					7					75
35										76
36										76
37										77
38)				77
39										78
40										79 80
41 42										80 81
43										82
44										83
45					/					83
46										84
47										84
48										85 85
50										86 86
51										87
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56 57										89 89
58										89
59										89
60										90
61										90
62			,							90
63										90
64 65			7							90 90
66										90
67										91
68										91
69										91
70										91

TEXASLIFE INSURANCE CHILD MONTHLY PREMIUMS

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

		Express issue								
		GUARANTEED								
		Monthly	7 Premiu		ife Insura		Amounts	s Shown		PERIOD
					les Added C					Age to Which
Issue			Ac	ccidental De	eath Benefi	t (Ages 17-	59)			Coverage is
Age										Guaranteed at
(ALB)	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000	Table Premium
15D-1	,	,	· ·	,	,	,	,	,	ŕ	81
2-4										80
5-8										79
9-10										79
11-16										77
17-20				17.25					32.25	71
21-22				18.00					33.75	71
23				18.75					35.25	72 71
24-25 26				19.25 19.75					36.25 37.25	71 72
27-28				19.75					37.20	72 71
29										71
30-31										72
32										72
33										72
34										71
35										72
36										72
37										73
38										73
39										74
40										76
41										77 70
42										78
43 44										80 80
45										81
46										81
47										82
48										82
49										83
50										83
51										83
52										84
53										85
54										85
55 50				1						85
56 57										85 96
58		7		7						86 86
58 59										86 86
60										86
61										86
62										87
63										87
64										87
65										87
66										88
67						·		-		88
68										88
69										88
70										89

EXASLIFE INSURANCE

Since 1901 | 900 WASHINGTON | POST OFFICE BOX 830 | WACO, TEXAS 76703-0830

INDIVIDUAL LIFE INSURANCE APPLICATION

FOR HOME OFFICE USE ONLY

Plan Name: PureLife-plus
Policy Number:

1st Deduction Date:		Emplo	yer:		Policy Number:						
					Within the past has the Propos	ed Insured					
Proposed Insured(s)		Sex	Birth Date	Age^1	age 17 or old tobacco in a		Face Amount ²	Premium			
Employee Name						-					
• •											
Last		M/F			□ Y es □	□ No					
First	MI										
Social Sec No											
Hire Date											
Beneficiary (Spouse is beneficiary u	unless ot	herwise	e stated here)			Relation	ıship:				
Spouse Name											
Last		M/F			☐ Y es □	□No					
First	MI										
Social Sec No						-					
Current Occupation											
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)		<u> </u>	Relation	ıship:				
Children's Names (not required	if applyi	ing on	ly for Child Term	Rider)							
, ,											
		M/F			☐ Y es ☐] No					
Social Sec No											
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)	•		Relation	ship:				
		M/F			☐ Y es ☐] No					
Social Sec No											
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)			Relation	ıship:				
		M/F			□ Y es □	I No					
Social Sec No											
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)			Relation	ıship:				
		M/F			☐ Yes □	I No					
Social Sec No											
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)	П	Т	Relation	iship:				
		M/F			☐ Yes □	l No					
Social Sec No		,									
Beneficiary (Employee is beneficiary	y unless	otherw	vise stated here)		<u> </u>	Relation	ship:				
Select Riders to be added:			,	Add C	hild Term Rider pr	emium, if app	lied for: \$				
Child Term for \$10,000 added to po	olicy of:	☐ Er	nployee 🛮 Spouse	9		Total pro	emium: \$				
☐ Accidental Death ³ ☐ Waive			☐ Chronic III								
Payroll is per: ☐ Week ☐	Bi-Week	(☐ Semi-Month		I Month 🔲	Skip					
Home Address						•					
Street/P.O. Box:				City	:	State:	Zip:_				
Phone — Day: ()		Ever	ning: ()	J	Personal E-m		•				
Will proposed coverage replace or o	change a		- ,	nnuity p	oolicy? (If "Yes",	identify					
and complete replacement form.)	_	-				-	🗆 \	∕es □ No			
(1) Age as of Issue Date. (2) or	Face Am	ount p	ourchased by premit	ım shov	vn, if less. (3) Fo	r issue ages 1	7-59.				

1. During the last six months, has the proposed insured:		Employee	Spouse	Children		
		Yes No	Yes No	Yes No		
 a. Been actively at work on a full time basis, performing usual duties? If "No" furnish details below. 					N/A	
b. Been absent from work due to illness or medical treatment for a period of more than five consecutive working days? If "Yes" furnish details below.					N/A	
c. Been disabled or received tests, treatment or care of any kind in a hospital or nursing home or received chemotherapy, hormonal therapy for cancer, radiation therapy, dialysis treatment, or treatment for alcohol or drug abuse? If "Yes" furnish details below.						
QUES NO.	PROPOSED INSURED	DET	AILS			
REPRESENTATIONS: I represent to the best of my knowledge and belief that all statements and answers in this application are complete, true and correctly recorded, and are made as a consideration for the insurance applied for. I understand that Texas Life Insurance Company will rely on my statements and answers as being true and complete in deciding whether to issue insurance on the proposed insured(s). Insurance is effective under the policy only when it is delivered to the owner, if the full first premium is paid in cash and all of the statements in this application remain correct and complete. Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.						
X X						
Agent only: To the best of my knowledge the insurance applied for ☐ is ☐ is not to replace existing insurance or annuity. X Enroller/Agent Signature Print Enroller/Agent Name Agt No. ☐ Date City State						
Enroller/Agen	t Signature Print Enrolle	er/Agent Name Agt No. Date	Cit	у	State	



Applicant and Agent Statement on Existing Insurance

	Life)? ☐ Yes ☐ No If "Yes", complete	ing insurance or annuities (including coverage the Existing Insurance Form even if replace the policies paid entity due to expire within 5 years.	ement is not
	XApplicant Signature	Date	
	XEnroller/Agent Signature	Print Enroller/Agent Name	Agt No.
	Agent Certification		
AGENT STATEME	I certify that I have: (a) delivered to t	ne Applicant the Sales Brochure Series form Notice; and, (b) presented only guaranteed naterial used, if any (include form no).	
	XEnroller/Agent Signature	Date	

FORM: 04M006-RPLT R08-11

TEXASLIFE INSURANCE EXISTING INSURANCE FORM

do not want this notical	ce read aloud to me. (Applicants must initial only if they do not want the notice read
-	res we give you the option to have this notice read to you aloud. If an agent is not present, but otice read aloud, call your agent, or call the Home Office at 1-800-283-9233, extension 6814.
Section I. Existin	g Insurance or Annuities
Imp Thi wit You this	polacement of Life Insurance or Annuities portant Notice Four pages s document must be signed by the applicant and the producer and a copy left the the applicant are contemplating the purchase of a life insurance policy or annuity contract. In some cases a purchase may involve discontinuing or changing an existing policy or contract. If so, a replace- nt is occurring. Financed purchases are also considered replacements.
you or c	eplacement occurs when a new policy or contract is purchased and, in connection with the sale, discontinue making premium payments on the existing policy or contract, or an existing policy ontract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or d in a financial purchase.
func incl	nanced purchase occurs when the purchase of a new life insurance policy involves the use of ds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, uding accumulated dividends, of an existing policy, to pay all or part of any premium or paymen on the new policy. A financed purchase is a replacement.
sitio able A fi	should carefully consider whether a replacement is in your best interests. You will pay acquion costs and there may be surrender costs deducted from your policy or contract. You may be to make changes to your existing policy or contract to meet your insurance needs at less cost. nanced purchase will reduce the value of your existing policy or contract and may reduce the punt paid upon the death of the insured.
	want you to understand the effects of replacements before you make your purchase decision and that you answer the following questions and consider the questions on the back of this form.
	Yes No Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your existing policy or contract?
	Yes No Are you considering using funds from your existing policies or contracts to pay premiums due on the new policy or contracts?

If you answered "No" to BOTH questions, skip Section II and complete Section III.

FORM: 10M042

Section II. Replacing Existing Insurance or Annuities

If you answered YES to either of the above questions, list each existing policy or contract you are contemplating replacing (include the name of the insurer, the insured, and the contract number if available) and whether each policy will be replaced or used as a source of financing:

			Insured/Annuitant			
2. <u>_</u> 3.		_				
			ing company or its agent for			
the	old policy or contract.	[If you request one, an i	n force illustration, policy su	mmary or available		
disc	disclosure documents must be sent to you by the existing insurer.] Ask for and retain all sales ma					
		-	Be sure that you are making	=		
sion	n. The existing policy of	r contract is being repla	ced because:			
Section III. Signa	tures					
J						
I ce	rtify that the responses	s herein are, to the best	of my knowledge, accurate:			
X						
	licant Signature and P		Date			
Age	e nt Statement. I certi	fy that in this solicitation	on of insurance I used only co	ompany-approved		
sale	es materials and, pursu	ant to Company policy a	and law, left with the applica	nt an original or copy		
of a	ll sales material used i	n the solicitation.				
X						
	nt Signature and Print		Date			

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed policy or contract. One way to do this to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts. You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

PREMIUMS

Are they affordable?

Could they change?

You're older-are premiums higher for the proposed new policy?

How long will you have to pay premiums on the new policy? On the old policy?

POLICY VALUES

New policies usually take longer to build cash values and to pay dividends.

Acquisition costs for the old policy may have been paid, you will incur costs for the new one.

What surrender charges do the policies have?

What expense and sales charge will you pay on the new policy?

Does the new policy provide more insurance coverage?

INSURABILITY

If your health has changed since you bought your old policy, the new one could cost you more, or you could be turned down.

You may need a medical exam for a new policy.

Claims on most new policies for up to the first two years can be denied based on inaccurate statements.

Suicide limitations may begin anew on the new coverage.

IF YOU ARE KEEPING THE OLD POLICY AS WELL AS THE NEW POLICY

How are premiums for both policies being paid?

How will the premiums on your existing policy be affected?

Will a loan be deducted from death benefits?

What values from the old policy are being used to pay premiums?

FORM: 10M042

IF YOU ARE SURRENDERING AN ANNUITY OR INTEREST-SENSITIVE LIFE PRODUCT

Will you pay surrender charges on your old contract?

What are the interest rate guarantees for the new contract?

Have you compared the contract charges or other policy expenses?

OTHER ISSUES TO CONSIDER FOR ALL REPLACEMENTS

What are the tax consequences of buying the new policy?

Is this a tax free exchange? (See your tax advisor.)

Is there a benefit from favorable grandfathered treatment of the old policy under the federal tax code?

Will the existing insurer be willing to modify the old policy?

How does the quality and financial stability of the new company compare to the present company?

Form: 10M042



Privacy Notice - Two pages

Thank you for your interest in our products and services. We will review what you told us and may get further information if needed.

READ THIS NOTICE CAREFULLY

It describes in broad terms how we learn about you and anyone else who is to be insured under the contract you applied for. It tells how we treat that information. If anyone else is to be insured under the contract you applied for, what we say here also applies to information about him or her. We are required by law to give you this notice.

WHY WE NEED INFORMATION

We need to know about you (and anyone else to be insured) to provide the insurance and other products and services you've asked for. We may also need it to administer your business with us, evaluate claims, process transactions and run our business. And we need information from you and others to help us verify identities in order to prevent money laundering and terrorism.

We need to know your address, age and other basic information. But we may need more information, including finances, employment, health, hobbies or business conducted with us, or with other companies.

HOW WE GET INFORMATION

What we know about you (and anyone else to be insured) we get mostly from you. But we may also have to find out more from others in order to make sure that what we know is correct and complete. This personal information may be collected from persons other than you, and may be disclosed in certain circumstances to third parties without your authorization. Other sources may include adult relatives, employers, consumer reporting agencies, health care providers and others. Some sources may give us reports and may disclose what they know to others. We may ask for medical information about you. The Authorization you signed when you applied for insurance permits these sources to tell us about you. So we may, for instance, at our expense:

- Ask for a medical exam Ask for blood and urine tests
- Ask health care providers to give us health data, including information about alcohol or drug abuse

This will help us decide eligibility for insurance from us and what we should charge for it. We may also ask a consumer reporting agency for a "consumer report" about you (or anyone else to be insured). Consumer reports may tell us about a lot of things, like:

— Work and work history— Mode of living— Finances— Reputation— Dangerous sports activity— Driving record

If we ask an agency for an "investigative" report about you - which means that they will ask others about you - we will ask them to contact you as well. The information may be kept by the consumer reporting agency and given to others as permitted by law. The agency will give you a copy of the report it provides to us, if you ask the agency and can provide adequate identification. If you write to us, we will tell you if we have asked for a consumer report about you, and give you the name, address and phone number of the consumer reporting agency.

MIB, Inc. ("MIB") is a commonly used source of information. It is a not-for-profit association of life insurance companies. We and our reinsurers may give MIB health or other information about you. If you apply for life or health coverage from a member of MIB, or claim benefits from a member company, MIB may give that company any information it has about you. If you contact MIB, it will tell you what it knows about you. You have the right to ask MIB to correct its information about you. You may write to MIB, Inc., 50 Braintree Hill Park, Suite 400, Braintree, MA 02184-8734, call MIB at (866) 692-6901 or contact MIB at www.mib.com.

FORM: 09P012 R 04/20

HOW WE PROTECT WHAT WE KNOW

Because you entrust us with your personal information, we treat what we know about you confidentially. We tell our employees to carefully handle your information. They may get your information only with a good reason. We take steps to secure our computer databases and safeguard the information we have.

HOW WE USE AND DISCLOSE WHAT WE KNOW ABOUT YOU

We may use what we know about you to help us serve you better. We may use it, and disclose it to our affiliates and others, for any purpose allowed by law; for example, to:

— Help us evaluate your request for a product — Process information for us — Perform research for us

— Help us run our business — Help us comply with the law — Audit our business

— Confirm or correct what we know about you — Help us prevent fraud and other crimes

— Help us process claims and other transactions

When we disclose information to others to perform business services for us, they must take appropriate steps to protect this information. And they may use the information only for the purposes of performing those business services.

Other reasons we may disclose what we know about you include:

- Doing what a court or government agency requires us to do; for example, complying with a search warrant or subpoena
- Telling another company what we know about you, if we are or may be selling all or any part of our business or merging with another company
- Giving information to the government so that it can decide whether you may get government-paid benefits
- Telling your health care provider about a medical problem that you have but may not be aware of
- Giving your information to a peer review organization if you have health insurance with us
- Giving your information to someone who has a legal interest in your insurance, such as someone who lent you money and holds a lien on your contract

Generally, we will disclose only the information we consider reasonably necessary to disclose and no more. We may use what we know about you in order to offer you our other products and services.

YOU CAN SEE AND CORRECT YOUR INFORMATION

Generally, we will let you review what we know about you if you ask us in writing. (Because of its legal sensitivity, we will not show you anything that we learned in connection with a claim or lawsuit.) Also, if the law allows us to do so, we may decide to disclose what we know about your health only through your health care provider. If you tell us that what we know about you is incorrect, we will review it. If we agree with you, we will correct our records. If we do not agree with you, you may tell us in writing, and we will include your statement when we give your information to anyone outside our company or affiliate.

YOU CAN GET OTHER MATERIAL FROM US

In addition to any other privacy notice we may give you, we must give you a summary of our privacy policy once each year. You may have other rights under the law. If you want to know more about our privacy policy, please contact us at our website, www.texaslife.com, or write to us, c/o Texas Life Privacy Officer, PO Box 830, Waco, Texas 76703.

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Form: 21Mo13-ICC EXP-K-M-3AD Ro3/23