TEXASLIFE INSURANCE

CASE OVERVIEW

Overview for LAPORTE ISD May 25, 2021

EMPLOYEE AND SPOUSE EXPRESS ISSUE

Lifetin	ne Maximum Amounts for	Issue Ages Shown ⁽¹⁾⁽²⁾	
Proposed			$\mathbf{Express}^{(2)}$
Insured	Ages	Minimum	Maximum
	17 to 34	\$25,000	\$300,000
	35 to 39	15,000	300,000
Employee	40 to 49	10,000	300,000
	50 to 65	10,000	100,000
	66 to 70 ⁽⁵⁾	10,000	10,000
	17 to 34	25,000	50,000
	35 to 39	15,000	50,000
Spouse	40 to 49	10,000	50,000
	50 to 60	10,000	25,000
	61 to 70 ⁽⁵⁾	N/A	N/A
Child Policy	15 days - 26 ⁽⁴⁾	25,000	50,000
Grandchild(ren)	15 days - 18 ⁽⁴⁾	25,000	50,000

- 1. One policy and one risk classification available per insured at each enrollment.
- 2. At the insured's current issue age, Maximum shown is the cumulative maximum available, inclusive of all in-force plus currently applied for face amounts.
- 3. Minimum Employee participation for Express Issue is the greater of five lives or 10% of eligible Employees.
- 4. The Dependent's signature is required for 19 and older in some states. Coverage is not available on children in Washington or on grandchildren in Washington or Maryland. In Maryland, child must reside with the applicant to be eligible for coverage.
- 5. In the state of Washington, no coverage available for employees & spouses over age of 65.

RIDERS

Proposed Insured	Accidental Death (Ages 17-59)	Disability Waiver Prem (Ages 17-59)	Chronic Illness (All Ages)
Employee	Yes	No	Yes
Spouse	Yes	No	N/A
Child(ren)	Yes — Ages 17 & Up	No	N/A
Grandchild(ren)	Yes — Ages 17 & Up	No	N/A

IMPLEMENTATION AND ENROLLMENT TARGET DATES

Enrollment Start Date:	July 12, 2021	End of Enrollment Date	e: August 23, 2021	
First Deduction Date:	September 1, 2021	Policy Issue Date:	October 1, 2021	
Payroll Frequency: \square V	Weekly 🔲 Bi-weekly	X Semi-monthly	☐ Monthly ☐ Othe)1

Form: 18M065 PureLifePlus2018-B4AKD5ND9KS R06/21

TEXASLIFE INSURANCE SOLICITATION MEMO

May 25, 2021

To: Mark Johnston

From: Cindy Barr — hmkcab@texaslife.com Phone: 1-800-283-9233 Fax: 254-745-6355

Re: Franchise Number: 0000100093

LAPORTE ISD

Number of Eligible Employees — 2324

We have approved the above case for Express Issue voluntary payroll deduction enrollment (using our PureLife-plus Policy form). Minimum Employee participation for Express Issue is the greater of five lives or 10% of eligible Employees.

ELIGIBLE EMPLOYEES

Any employee eligibility is coordinated with the eligibility period required by the employer's benefit package available to employees. Eligible employees ages 17 - 70 may apply.

GENERAL REQUIREMENTS

See the Table on the Case Overview page for minimum and maximum face amounts.

EXPRESS ISSUE

Any proposed insured who cannot respond to the Express Issue questions "Yes", "No", "No", when applying for Express Issue limits is not eligible to apply. It is not necessary that the employee also apply for coverage on his or her own life in order to apply for insurance on the spouse and dependents.

PREVIOUSLY RATED OR DECLINED

To qualify for Express, the proposed insured (including spouse or child) must not have had an application with Texas Life previously rated or declined.

SPOUSE'S SIGNATURE

When applying for coverage on the spouse, the spouse's signature is required on the application in the states of Florida, Massachusetts, Michigan, Minnesota, Pennsylvania and South Carolina. In California, Nevada, and Mississippi, a notification will be mailed to the spouse that an application for a policy on his or her life has been received. In California only, this only applies to those face amounts that exceed \$50,000. Coverage is only available to those who are married or in a legally recognized civil union or domestic partnership.

OPTIONAL COVERAGE ON CHILDREN AND GRANDCHILDREN — EXPRESS *

A flat \$25,000 of coverage (individual life policies) is available on children ages 15 Days - 26 and/or grandchildren ages 15 Days - 18. The Dependent's signature is required for 19 and older in the states of Florida, Illinois, Louisiana, Michigan, Minnesota, Mississippi and Pennsylvania.

STEP-CHILDREN

Applications on step-children require the signature of the natural parent or legally appointed guardian (include a copy of guardianship papers), unless the child resides with the employee.

* Coverage is not available on children in Washington or on grandchildren in Washington or Maryland. In Maryland, child must reside with the applicant to be eligible for coverage.

ACCIDENTAL DEATH BENEFITS AND ACCELERATED DEATH BENEFIT RIDER FOR CHRONIC ILLNESS INCLUDED

ACCIDENTAL DEATH BENEFITS INCLUDED

Accidental Death Benefit is included on all employees, spouse, children and grandchildren, issue ages 17-59. The Accidental Death Benefit to age 65 is equal to the base plan face amount issued (subject to a maximum ADB in-force limit of \$350,000). All standard issue insureds who qualify by reason of age will be issued this benefit.

ACCELERATED DEATH BENEFIT RIDER FOR CHRONIC ILLNESS INCLUDED

Chronic Illness is an included benefit available for employees only, issue ages 17-70. This benefit provides an accelerated death benefit during the lifetime of the insured, if the insured is certified chronically ill and conditions of the Accelerated Death Benefit Rider for Chronic Illness have been met.

EFFECT OF IN-FORCE COVERAGE ON UNDERWRITING REQUIREMENTS

In-force coverage can effect the current application for insurance. Generally, this will occur during re-enrollment. Use the table below to determine the impact of existing policies on lifetime maximum limits and underwriting requirements for the current application.

IF Previous In-Force Insurance	Effect of In-Force Coverage on Lifetime Maximum Coverage And if the Current Application is
Was Issued	Express Issue
Simplified Worksite	Ignore
MBL & LeveLife	Ignore
Express Worksite	Count

EFFECT OF PRIOR APPLICATION ON EXPRESS ISSUE ELIGIBILITY

A prior application can effect whether or not the proposed insured is currently eligible for Express Issue. Generally, this will occur during re-enrollment. Use the table below to determine if the applicant is eligible to apply on an Express Issue basis.

Pre	vious Application Was	Currently Eligible for Express
	Rated or Declined	No
	Eligible for Express, but did not	Yes
	apply	165
Worksite	Eligible for Express Issue at first	
Application	enrollment & policy issued standard	Yes*
(Include MBL	and is currently in-force	
and LeveLife)	Eligible for Simplified, but did not	Yes
	apply	168
	Previously Incomplete, Not Taken,	Yes*
	Withdrawn, Postponed, or Lapsed	ies
* Previous app	may be used to determine the accuracy	of current app answers.

REPLACEMENTS

If our policy will replace an existing policy, we need a signed Replacement Form appropriate to the state in which the solicitation occurs. The application will be delayed if all of the replacement forms are not completed.

REQUIRED FORMS TO COMPLETE THE CASE

Certain forms are required to complete this case and other forms are optional. Applications cannot be processed without the required forms. Below is a list of these forms and the reasons we need them.

- Voluntary Payroll Deduction Employer Agreement This is written verification that the employer agrees to deduct and remit premiums to us. This form is required prior to processing any applications.
- Signature Card When applying for coverage on the spouse, the spouse's signature is required on the application in the states of Florida, Massachusetts, Michigan, Minnesota, Pennsylvania and South Carolina. The Dependent's signature is required for 19 and older in the states of Florida, Illinois, Louisiana, Michigan, Minnesota, Mississippi and Pennsylvania.

AGENT LICENSING/APPOINTMENT AND RISK RESIDENT STATES

Don't overlook the importance of agent licensing. Contact us immediately if any enroller is not currently appointed with Texas Life, or is not currently appointed with Texas Life in a state where an application on an employee may be taken. For help contact Case Implementation Department at 1-800-283-9233 ext 6850.

The following states are known as "risk resident states," and require the agent to be appointed in the state if the applicant lives there, regardless of where the application is taken. Be sure you are properly licensed and appointed if any applicants in this enrollment reside in any of these states.

Alaska	Florida	Georgia
Iowa	Louisiana	Michigan
Mississippi	North Carolina	New Hampshire
Oklahoma	South Dakota	West Virginia

MARKETING SUPPLIES

Please contact us if you need supplies, such as sales brochures and payroll deduction authorization forms. Any solicitation or advertising material not provided by the Home Office must be approved in writing by our Compliance Department prior to use.

Form: 18M065 PureLifePlus2018-B4AKD5ND9KS R06/21

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

	Pur	егне-ри	us — Sta	inaara k	KISK TADI	e Premi	ums —	Non-Tob	acco —	Express Issue
	~				T 10 T					GUARANTEED
	S	emi-Mon	thly Pren				ace Amou	nts Show	'n	PERIOD
					les Added C					Age to Which
Issue					eath Benefi	, -	· ·			Coverage is
Age		aı	nd Accelera		Benefit for	Chronic Illr	iess (All Ag	ges)		Guaranteed at
Issue	\$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 9-10						1				79 79
9-10 11-16										79 77
17-20		6.53	11.93	17.33	22.73	33.53	44.33	55.13	65.93	75
21-22		6.67	12.20	17.74	23.28	34.35	45.43	56.50	67.58	74
23		6.80	12.48	18.15	23.83	35.18	46.53	57.88	69.23	75
24-25		6.94	12.75	18.57	24.38	36.00	47.63	59.25	70.88	74
26		7.22	13.30	19.39	25.48	37.65	49.83	62.00	74.18	75
27-28		7.35	13.58	19.80	26.03	38.48	50.93	63.38	75.83	74
29		7.49	13.85	20.22	26.58	39.30	52.03	64.75	77.48	74
30-31		7.63	14.13	20.63	27.13	40.13	53.13	66.13	79.13	73
32		8.04	14.95	21.87	28.78	42.60	56.43	70.25	84.08	74
33		8.32 8.73	15.50 16.33	22.69 23.93	29.88 31.53	44.25 46.73	58.63 61.93	73.00 77.13	87.38 92.33	74 75
35		9.28	17.43	25.95 25.58	33.73	50.03	66.33	82.63	92.33 98.93	76
36		9.55	17.48	26.40	34.83	51.68	68.53	85.38	102.23	76
37		9.97	18.80	27.64	36.48	54.15	71.83	89.50	107.18	77
38		10.38	19.63	28.88	38.13	56.63	75.13	93.63	112.13	77
39		11.07	21.00	30.94	40.88	60.75	80.63	100.50	120.38	78
40	5.38	11.75	22.38	33.00	43.63	64.88	86.13	107.38	128.63	79
41	5.76	12.72	24.30	35.89	47.48	70.65	93.83	117.00	140.18	80
42	6.20	13.82	26.50	39.19	51.88	77.25	102.63	128.00	153.38	81
43	6.59	14.78	28.43	42.08	55.73	83.03	110.33	137.63	164.93	82
44	6.97	15.74	30.35	44.97	59.58	88.80	118.03	147.25	176.48	83
45 46	7.36 7.80	16.70 17.80	32.28 34.48	47.85 51.15	63.43 67.83	94.58 101.18	125.73 134.53	156.88 167.88	188.03 201.23	83 84
47	8.18	18.77	36.40	54.04	71.68	106.95	142.23	177.50	201.23 212.78	84
48	8.57	19.73	38.33	56.93	75.53	112.73	149.93	187.13	224.33	85
49	9.06	20.97	40.80	60.64	80.48	120.15	159.83	199.50	239.18	85
50	9.61	22.34	43.55	64.77	85.98					86
51	10.27	23.99	46.85	69.72	92.58					87
52	10.99	25.78	50.43	75.08	99.73					88
53	11.54	27.15	53.18	79.20	105.23					88
54	12.09	28.53	55.93	83.33	110.73					88
55 Ee	12.69	30.04	58.95 61.70	87.87	116.78					89
56 57	13.24 13.90	$31.42 \\ 33.07$	$61.70 \\ 65.00$	91.99 96.94	122.28 128.88					89 89
58	13.90	34.58	68.03	101.48	134.93					89 89
59	15.17	36.23	71.33	106.43	141.53					89 89
60	15.59	37.29	73.45	109.62	145.78					90
61	16.31	39.08	77.03	114.98	152.93					90
62	17.19	41.28	81.43	121.58	161.73					90
63	18.07	43.48	85.83	128.18	170.53					90
64	19.00	45.82	90.50	135.19	179.88					90
65	20.05	48.43	95.73	143.03	190.33					90
66	21.20									90
67	22.47									91
68 69	23.84 25.22									91 91
70	26.65									91
10	20.00									91

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

	acco —	Express issue								
						_				GUARANTEED
	\mathbf{S}	emi-Mon	thly Pren			urance Fa	ace Amou	ints Show	n .	PERIOD
					les Added (Age to Which
Issue						t (Ages 17-				Coverage is
Age		a	nd Accelera	ted Death	Benefit for	Chronic Illn	ness (All Ag	ges)		Guaranteed at
Issue	\$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 9-10										79 79
9-10 11-16										79 77
17-20		9.28	17.43	25.58	33.73	50.03	66.33	82.63	98.93	71
21-22		9.69	18.25	26.82	35.38	52.50	69.63	86.75	103.88	71
23		10.10	19.08	28.05	37.03	54.98	72.93	90.88	108.83	72
24-25		10.38	19.63	28.88	38.13	56.63	75.13	93.63	112.13	71
26		10.65	20.18	29.70	39.23	58.28	77.33	96.38	115.43	72
27-28		10.93	20.73	30.53	40.33	59.93 60.75	79.53	99.13	118.73	71
29 30-31		11.07 12.44	21.00 23.75	30.94 35.07	40.88	60.75 69.00	80.63 91.63	100.50 114.25	120.38 136.88	71 72
30-31		12.44 12.85	23.75 24.58	36.30	48.03	71.48	91.03	114.25	130.88	72
33		12.99	24.85	36.72	48.58	72.30	96.03	119.75	143.48	72
34		13.13	25.13	37.13	49.13	73.13	97.13	121.13	145.13	71
35		14.09	27.05	40.02	52.98	78.90	104.83	130.75	156.68	72
36		14.50	27.88	41.25	54.63	81.38	108.13	134.88	161.63	72
37		15.47	29.80	44.14	58.48	87.15	115.83	144.50	173.18	73
38 39		15.88	30.63	45.38	60.13	89.63	119.13	148.63	178.13	73 74
40	8.07	16.98 18.49	32.83 35.85	48.68 53.22	64.53	96.23 105.30	127.93 140.03	159.63 174.75	191.33 209.48	74 76
41	8.57	19.73	38.33	56.93	75.53	112.73	149.93	187.13	224.33	77
42	9.17	21.24	41.35	61.47	81.58	121.80	162.03	202.25	242.48	78
43	9.94	23.17	45.20	67.24	89.28	133.35	177.43	221.50	265.58	80
44	10.33	24.13	47.13	70.13	93.13	139.13	185.13	231.13	277.13	80
45	10.88	25.50	49.88	74.25	98.63	147.38	196.13	244.88	293.63	81
46	11.32	26.60	52.08 54.83	77.55	103.03	153.98	204.93	255.88	306.83	81
47 48	11.87 12.36	27.98 29.22	54.83 57.30	81.68 85.39	108.53 113.48	162.23 169.65	$215.93 \\ 225.83$	269.63 282.00	323.33 338.18	82 82
49	13.08	31.00	60.88	90.75	120.63	180.38	240.13	299.88	359.63	83
50	13.68	32.52	63.90	95.29	126.68					83
51	14.29	34.03	66.93	99.83	132.73					83
52	15.17	36.23	71.33	106.43	141.53					84
53	15.94	38.15	75.18	112.20	149.23					85
54	16.65	39.94	78.75	117.57	156.38					85 85
55 56	17.42 18.30	41.87 44.07	82.60 87.00	123.34 129.94	164.08 172.88					85 85
57	19.18	46.27	91.40	136.54	181.68					86
58	20.12	48.60	96.08	143.55	191.03					86
59	21.05	50.94	100.75	150.57	200.38					86
60	21.64	52.42	103.70	154.99	206.28					86
61	22.91	55.58	110.03	164.48	218.93					86
62	24.12	58.60	116.08	173.55	231.03					87
63 64	25.33 26.54	61.63 64.65	122.13 128.18	182.63 191.70	243.13 255.23					87 87
65	26.54 27.86	64.65 67.95	128.18 134.78	201.60	255.23					87 87
66	29.29	01.00	101.10	201.00	200.40					88
67	30.83									88
68	32.42									88
69	34.13									88
70	35.94									89

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

	Pure	eriie-biu	.s — Sta	ndard Ri	isk rabie	Premiu	ıms — r	ion-Toda	icco — E	xpress Issue
										GUARANTEED
		Life I	nsurance				•	emiums S	Shown	PERIOD
	Prem					lded Cost fo				Age to Which
Issue	For					Benefit (Age				Coverage is
Age	\$10,000		and Ac	celerated D	eath Benef	it for Chron	ic Illness (A	All Ages)		Guaranteed at
(ALB)	Face	\$10.00	\$12.00	\$14.00	\$16.00	\$18.00	\$20.00	\$22.00	\$24.00	Table Premium
15D-1							0			81
2-4										80
5-8										79
9-10										79
11-16 17-20		41,088	50,348	59,607	68,866	78,124	87,374	96,640	105,890	77 75
21-22		40,068	49,098	58,124	67,142	76,124	85,215	94,244	103,330	74
23		39,097	47,897	56,719	65,529	74,338	83,136	91,955	100,771	75
24-25		38,159	46,775	55,374	63,979	72,581	81,183	89,785	98,385	74
26		36,445	44,662	52,874	61,089	69,302	77,516	85,729	93,932	75
27-28		35,643	43,671	51,707	59,739	67,772	75,804	83,828	91,868	74
29		34,873	42,730	50,590	58,448	66,307	74,166	82,024	89,874	74
30-31		34,124	41,827	49,520	57,212	64,890	72,597	80,289	87,981	73
32		32,098	39,331	46,565	53,798	61,031	68,265	75,498	82,731	74
33		30,870	37,827	44,783	51,740	58,696	65,653	72,609	79,566	74
34		29,195	35,774	42,352	48,927	55,510	62,089	68,656	75,247	75 76
35 36		27,221 $26,336$	33,359 $32,271$	39,494 38,205	$45,624 \\ 44,138$	51,764 50,075	57,894 56,000	64,034	70,163 $67,874$	76 76
37		25,107	30,764	36,412	42,078	47,737	56,009 53,394	61,944 59,053	64,710	77
38		23,987	29,391	34,798	40,203	45,608	51,014	56,416	61,824	77
39		22,328	27,359	32,384	37,422	42,453	47,484	52,516	57,548	78
40	5.38	20,878	25,589	30,295	35,001	39,706	44,407	49,118	53,821	79
41	5.76	19,148	23,461	27,778	32,093	36,408	40,720	45,038	49,353	80
42	6.20	17,488	21,429	25,370	29,311	33,252	37,193	41,124	45,074	81
43	6.59	16,255	19,918	23,581	27,244	30,907	34,570	38,233	41,896	82
44	6.97	15,184	18,606	22,028	25,449	28,871	32,293	35,712	39,136	83
45	7.36	14,246	17,456	20,665	23,874	27,087	30,297	33,508	36,718	83
46	7.80	13,306	16,305	19,303	22,302	25,300	28,299	31,297	34,296	84
47 48	8.18 8.57	$12,580 \\ 11,925$	15,413 14,617	18,250 17,306	21,085 19,994	23,920 $22,682$	26,755 $25,370$	29,589 28,058	32,424 $30,746$	84 85
49	9.06	11,185	13,704	16,226	18,747	21,267	23,788	26,308	28,828	85
50	9.61	10,459	12,817	15,173	17,531	19,887	22,246	24,602	26,960	86
51	10.27	10,100	11,889	14,078	16,266	18,453	20,638	22,827	25,014	87
52	10.99		11,030	13,058	15,087	17,115	19,142	21,171	23,200	88
53	11.54		10,447	12,368	14,290	16,211	18,129	20,053	21,975	88
54	12.09			11,747	13,570	15,393	17,221	19,047	20,872	88
55	12.69			11,130	12,863	14,592	16,321	18,051	19,780	89
56	13.24	A		10,626	12,279	13,927	15,579	17,231	18,880	89
57	13.90			10,077	11,642	13,210	14,775	16,339	17,904	89
58 50	14.51				11,118	12,612	14,107	15,602	17,097	89 80
59 60	15.17 15.59				10,594 10,284	12,020 11,667	13,444 $13,049$	14,868 14,431	$16,293 \\ 15,815$	89 90
61	16.31				10,204	11,007	12,435	13,751	15,070	90
62	17.19					10,508	11,753	12,998	14,244	90
63	18.07					,500	11,143	12,323	13,504	90
64	19.00		7				10,560	11,678	12,798	90
65	20.05						,	11,033	12,091	90
66	21.20									90
67	22.47									91
68	23.84									91
69	25.22									91
70	26.65									91

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

	I	T 02.02	e pius	Jtanac	ila Kisk	Table I I	Cilitainis			GUARANTEED
		I ifo I	ncuronaa	Fogo Am	nounts for	. Somi-Ma	onthly Dr	omiume (Shown	PERIOD
	Prem	Life I	nsui ance		Includes Ad		-	emiums s	onown	Age to Which
T					ntal Death I					_
Issue	For					, -	,	111 A mag)		Coverage is
Age	\$10,000	#12.00			Death Benefi			0 /	400.00	Guaranteed at
(ALB)	Face	\$12.00	\$14.00	\$16.00	\$18.00	\$20.00	\$22.00	\$25.00	\$28.00	Table Premium
15D-1 2-4										81 80
5-8										79
9-10										79
11-16										77
17-20		33,359	39,494	45,624	51,764	57,894	64,034	73,237	82,432	71
21-22		31,752	37,590	43,427	49,271	55,110	60,949	69,709	78,463	71
23		30,293	35,864	41,435	47,006	52,577	58,146	66,505	74,861	72
24-25		29,391	34,798	40,203	45,608	51,014	56,416	64,528	72,624	71
26		28,544	33,793	39,042	44,292	49,541	54,791	62,661	70,539	72
27-28 29		27,742 $27,359$	32,845 $32,384$	37,945 $37,422$	43,049 42,453	48,148 47,484	53,253 52,516	60,898 60,063	68,559 $67,611$	71 71
30-31		21,509	28,454	32,873	37,293	41,713	46,126	52,763	59,393	72
32			27,453	31,717	35,980	40,246	44,510	50,903	57,303	72
33			27,132	31,348	35,563	39,779	43,993	50,316	56,639	72
34			26,818	30,990	35,156	39,318	43,490	49,740	55,990	71
35		20,974	24,832	28,683	32,546	36,396	40,261	46,047	51,833	72
36		20,327	24,062	27,804	31,543	35,281	39,019	44,624	50,234	72
37		18,963	22,448	25,932	29,425	32,912	36,396	41,624	46,860	73
38		18,433	21,823	25,212	28,602	31,992	$35,\!374$	40,464	$45,\!551$	73
39		17,152	20,308	23,463	26,617	29,772	32,921	37,652	42,384	74
40	8.07	15,659	18,539	21,415	24,299	27,178	30,058	34,374	38,697	76
41 42	8.57	14,617	17,306	19,994	22,682 $20,974$	25,370	28,058	32,089	36,123	77
43	9.17 9.94	13,518 12,336	16,004 14,606	18,490 16,874	19,140	23,462 21,408	25,946 23,682	29,676 27,085	33,406 30,488	78 80
44	10.33	11,821	13,995	16,165	18,343	21,408 $20,517$	22,690	27,083 $25,952$	29,212	80
45	10.88	11,149	13,205	15,257	17,308	19,359	21,408	24,488	27,562	81
46	11.32	10,671	12,632	14,598	16,561	18,524	20,485	23,429	26,374	81
47	11.87	10,124	11,988	13,851	15,713	17,575	19,437	22,230	25,024	82
48	12.36		11,459	13,240	15,021	16,801	18,581	21,251	23,921	82
49	13.08		10,775	12,448	14,121	15,795	17,469	19,978	22,490	83
50	13.68		10,255	11,848	13,441	15,034	16,626	19,017	21,404	83
51	14.29			11,304	12,823	14,342	15,863	18,140	20,420	83
52	15.17			10,594	12,020	13,444	14,868	17,005	19,139	84
53 54	15.94 16.65			10,044	11,393 10,870	$12,745 \\ 12,158$	$14,096 \\ 13,445$	$16,121 \\ 15,376$	18,146 $17,311$	85 85
55	17.42				10,870	12,158	12,811	14,652	16,493	85
56	18.30				10,550	10,990	12,011 $12,152$	13,899	15,647	85
57	19.18					10,453	11,562	13,224	14,883	86
58	20.12					,	10,992	12,572	14,152	86
59	21.05						10,477	11,983	13,488	86
60	21.64						10,175	11,638	13,100	86
61	22.91					· · · · · · · · · · · · · · · · · · ·		10,962	12,339	86
62	24.12							10,385	11,690	87
63	25.33	ļ							11,105	87
64	26.54								10,576	87
65 66	27.86 29.29								10,054	87 88
67	30.83									88
68	32.42									88
69	34.13									88
70	35.94									89
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TEXASLIFE INSURANCE COMPANY

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

	<u> </u>	erne-bi	us — Jie	illualu r	NISK TAU	e Fiellii	uiiis — i	NOII-10D	<u> acco </u>	Express issue
	~						À	. ~		GUARANTEED
	S	emi-Mon	thly Pren				ace Amou	nts Show	n	PERIOD
				Includ	les Added (Cost for				Age to Which
Issue			A	ccidental D	eath Benefi	t (Ages 17-	59)			Coverage is
Age										Guaranteed at
Issue	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000	Table Premium
15D-1	,	,	, ,	4.63	, ,	,			8.13	81
2-4				4.75					8.38	80
5-8				4.88					8.63	79
9-10				5.00					8.88	79
11-16				5.13					9.13	77
17-20				6.13	7.13	8.13	9.13	10.13	11.13	75
21-22				6.25	7.28	8.30	9.33	10.35	11.38	74
23				6.38	7.43	8.48	9.53	10.58	11.63	75 74
24-25				6.50	7.58	8.65	9.73	10.80	11.88	74
26				6.75	7.88	9.00	10.13	11.25	12.38	75 74
27-28 29				6.88 7.00	8.03 8.18	$9.18 \\ 9.35$	10.33 10.53	11.48 11.70	12.63 12.88	74 74
30-31				7.00	8.33	9.53	10.53	11.70	13.13	73
32				7.13	8.78	10.05	11.33	12.60	13.13	73 74
33				7.75	9.08	10.40	11.73	13.05	14.38	74
34				8.13	9.53	10.93	12.33	13.73	15.13	75
35		5.63	7.13	8.63	10.13	11.63	13.13	14.63	16.13	76
36		5.78	7.33	8.88	10.43	11.98	13.53	15.08	16.63	76
37		6.00	7.63	9.25	10.88	12.50	14.13	15.75	17.38	77
38		6.23	7.93	9.63	11.33	13.03	14.73	16.43	18.13	77
39		6.60	8.43	10.25	12.08	13.90	15.73	17.55	19.38	78
40	5.03	6.98	8.93	10.88	12.83	14.78	16.73	18.68	20.63	79
41	5.38	7.50	9.63	11.75	13.88	16.00	18.13	20.25	22.38	80
42	5.78	8.10	10.43	12.75	15.08	17.40	19.73	22.05	24.38	81
43	6.13	8.63	11.13	13.63	16.13	18.63	21.13	23.63	26.13	82
44	6.48	9.15	11.83	14.50	17.18	19.85	22.53	25.20	27.88	83
45	6.83	9.68	12.53	15.38	18.23	21.08	23.93	26.78	29.63	83
46	7.23 7.58	10.28 10.80	13.33 14.03	16.38 17.25	19.43	22.48 23.70	25.53 26.93	28.58 30.15	31.63 33.38	84 84
47 48	7.93	11.33	14.03	18.13	20.48 21.53	24.93	28.33	31.73	35.13	85
49	8.38	12.00	15.63	19.25	22.88	26.50	30.13	33.75	37.38	85
50	8.88	12.75	16.63	20.50	22.00	20.00	90.19	55.10	91.90	86
51	9.48	13.65	17.83	22.00						87
52	10.13	14.63	19.13	23.63						88
53	10.63	15.38	20.13	24.88						88
54	11.13	16.13	21.13	26.13						88
55	11.68	16.95	22.23	27.50						89
56	12.18	17.70	23.23	28.75						89
57	12.78	18.60	24.43	30.25						89
58	13.33	19.43	25.53	31.63						89
59	13.93	20.33	26.73	33.13						89
60	14.28	20.85	27.43	34.00						90
61										90
62 62										90
63			Y							90
64 65			7							90 90
66										90 90
67										91
68										91
69										91
70										91
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TEXASLIFE INSURANCE COMPANY

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

		ruicli	c-pius =	Jtanu	aiu Kisk	Table	Cilliani	3 – 100	acco —	Express issue
										GUARANTEED
		emi-Mon	thly Pren			urance Fa	ice Amou	nts Show	n	PERIOD
				Includ	les Added C	Cost for				Age to Which
Issue			Ad	ccidental D	eath Benefi	t (Ages 17-5	59)			Coverage is
Age										Guaranteed at
Issue	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000	Table Premium
15D-1							·			81
2-4										80
5-8										79
9-10										79
11-16				0.69	10.19	11.69	10.10	14.69	16.10	77
17-20 21-22				8.63 9.00	10.13 10.58	11.63 12.15	13.13 13.73	14.63 15.30	16.13 16.88	71 71
23				9.38	11.03	12.13	14.33	15.98	17.63	72
24-25				9.63	11.33	13.03	14.73	16.43	18.13	71
26				9.88	11.63	13.38	15.13	16.88	18.63	72
27-28				10.13	11.93	13.73	15.53	17.33	19.13	71
29				10.25	12.08	13.90	15.73	17.55	19.38	71
30-31				11.50	13.58	15.65	17.73	19.80	21.88	72
32				11.88	14.03	16.18	18.33	20.48	22.63	72
33				12.00	14.18	16.35	18.53	20.70	22.88	72
34		0.05	10.69	12.13	14.33	16.53	18.73	20.93	23.13	71
35 36		8.25 8.48	10.63 10.93	13.00 13.38	15.38 15.83	17.75 18.28	20.13 20.73	22.50 23.18	24.88 25.63	72 72
37		9.00	11.63	14.25	16.88	19.50	20.13	24.75	27.38	73
38		9.23	11.93	14.63	17.33	20.03	22.73	25.43	28.13	73
39		9.83	12.73	15.63	18.53	21.43	24.33	27.23	30.13	74
40	7.48	10.65	13.83	17.00	20.18	23.35	26.53	29.70	32.88	76
41	7.93	11.33	14.73	18.13	21.53	24.93	28.33	31.73	35.13	77
42	8.48	12.15	15.83	19.50	23.18	26.85	30.53	34.20	37.88	78
43	9.18	13.20	17.23	21.25	25.28	29.30	33.33	37.35	41.38	80
44	9.53	13.73	17.93	22.13	26.33	30.53	34.73	38.93	43.13	80
45	10.03	14.48	18.93	23.38	27.83	32.28	36.73	41.18	45.63	81
$\frac{46}{47}$	10.43 10.93	15.08 15.83	19.73 20.73	$24.38 \\ 25.63$	29.03 30.53	33.68 35.43	38.33 40.33	42.98 45.23	47.63 50.13	81 82
48	11.38	16.50	21.63	26.75	31.88	37.00	42.13	47.25	52.38	82
49	12.03	17.48	22.93	28.38	33.83	39.28	44.73	50.18	55.63	83
50	12.58	18.30	24.03	29.75				-		83
51	13.13	19.13	25.13	31.13						83
52	13.93	20.33	26.73	33.13						84
53	14.63	21.38	28.13	34.88						85
54	15.28	22.35	29.43	36.50						85
55 56	15.98 16.78	23.40 24.60	30.83 32.43	38.25 40.25						85 85
56 57	16.78 17.58	24.60 25.80	34.03	40.25						85 86
58	18.43	27.08	35.73	44.38						86
59	19.28	28.35	37.43	46.50						86
60	19.78	29.10	38.43	47.75						86
61										86
62										87
63										87
64										87
65 66										87
66 67										88 88
68										88 88
69										88
70										89

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

	Pure	erne-biu	.S — Sta	naara k	isk Table	Premiu	tms — r	ion-Toba	acco — E	xpress Issue
										GUARANTEED
		Life I	Life Insurance Face Amounts for Semi-Monthly Premiums Shown						PERIOD	
	Prem		Includes Added Cost for						Age to Which	
Issue	For			Accider	ntal Death I	Benefit (Age	es 17-59)			Coverage is
Age	\$10,000									Guaranteed at
(ALB)	Face	\$10.00	\$12.00	\$14.00	\$16.00	\$18.00	\$20.00	\$22.00	\$24.00	Table Premium
15D-1										81
2-4										80
5-8										79
9-10						`				79
11-16		44.074								77
17-20 21-22		44,374 43,293								75 74
23		43,293 42,262								74 75
24-25		41,280								74
26		39,445	48,334				λ			75
27-28		38,587	47,283							74
29		37,766	46,277							74
30-31		36,980	45,312							73
32		34,804	42,639							74
33		33,491	41,038	48,585						74
34		31,697	38,840	45,983						75
35		29,584	36,250	42,913	49,584					76
36		28,624	35,081	41,533	47,984					76
37 38		27,308 26,103	33,462 31,986	39,616 37,868	45,770 $43,751$	49,624				77 77
39		24,315	29,795	35,274	40,754	46,233				78
40	5.03	22,757	27,878	33,013	38,135	43,270	48,392			79
41	5.38	20,876	25,589	30,295	35,000	39,706	44,409	49,118		80
42	5.78	19,087	23,382	27,688	31,990	36,291	40,592	44,888	49,194	81
43	6.13	17,750	21,750	25,750	29,750	33,750	37,750	41,750	45,750	82
44	6.48	16,589	20,328	24,065	27,804	31,543	35,281	39,019	42,758	83
45	6.83	15,570	19,079	22,588	26,097	29,606	33,115	36,623	40,127	83
46	7.23	14,550	17,828	21,107	24,381	27,662	30,942	34,222	37,500	84
47	7.58	13,760	16,861	19,962	23,062	26,161	29,264	32,365	35,466	84
48	7.93	13,052	15,993	18,933	21,874	24,816	27,758	30,699	33,636	85
49 50	8.38 8.88	$12,242 \\ 11,452$	15,001 14,033	$17,759 \\ 16,613$	20,518 19,193	23,276 $21,775$	26,035 $24,355$	28,794	31,552	85 86
50 51	9.48	10,625	13,024	15,418	17,814	20,210	22,605			87
52	10.13	10,020	12,084	14,306	16,528	18,750	20,973	23,194		88
53	10.63		11,447	13,553	15,656	17,764	19,869	21,974	24,079	88
54	11.13		10,874	12,874	14,874	16,874	18,874	20,874	22,874	88
55	11.68		10,309	12,204	14,100	15,996	17,889	19,787	21,682	89
56	12.18	1		11,650	13,462	15,272	17,082	18,889	20,701	89
57	12.78			11,052	12,769	14,485	16,202	17,917	19,633	89
58	13.33			10,554	12,192	13,832	15,472	17,111	18,750	89
59	13.93			10,059	11,622	13,183	14,747	16,309	17,872	89
60	14.28				11,312	12,833	14,354	15,875	17,396	90
61 62										90 90
63	4									90 90
64			V							90
65			/							90
66										90
67										91
68										91
69										91
70										91

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

		Pulelii	e-pius –	Stanua	liu Kisk	Table FI	emiums	_ 1006		xpress issue
										GUARANTEED
		Life I	nsurance	Face Am	ounts for	· Semi-Mo	onthly Pr	emiums S	Shown	PERIOD
	Prem			-	Includes Ad	ded Cost fo	or			Age to Which
Issue	For				ntal Death I					Coverage is
Age	\$10,000			ricciaei	itai Baaii i	30110110 (1180	35 11 30)			Guaranteed at
_	The state of the s	Ф1 2 00	Ф1.4.00	# 14.00	T #10.00	#20.00	#22.00	#a# 00	#20.00	
(ALB)	Face	\$12.00	\$14.00	\$16.00	\$18.00	\$20.00	\$22.00	\$25.00	\$28.00	Table Premium
15D-1										81
2-4										80
5-8										79
9-10										79
11-16		96.050	40.019	40 504						77
17-20		36,250	42,913	49,584						71
21-22		34,524	40,874	47,223						71 70
23		32,955	39,016	45,076	40.604					72 71
24-25		31,986	37,868	43,751	49,624					71
26		31,072	36,786	42,501	48,215					72 71
27-28		30,209	35,764	41,320	46,874					71
29		29,795	35,274	40,754	46,233	45, 400				71
30-31		26,205	31,025	35,844	40,659	45,482	40 - 4-			72 70
32		25,291	29,942	34,594	39,245	43,891	48,547			72 7 2
33		25,000	29,598	34,196	38,794	43,386	47,989			72
34		22.000	29,262	33,807	38,353	42,893	47,443			71
35		22,890	27,106	31,316	35,527	39,737	43,948	40 505		72 7 2
36		22,194	26,276	30,358	34,438	38,521	42,603	48,725		72
37		20,715	24,524	28,334	32,139	35,953	39,762	45,477	40.700	73 70
38		20,134	23,843	27,547	31,250	34,954	38,654	44,213	49,769	73 74
39	7.40	18,750	22,199	25,643	29,095	32,544	35,992	41,162	46,337	74
40	7.48	17,124	20,276	23,424	26,575	29,725	32,874	37,599	42,323	76
41	7.93	15,993	18,933	21,874	24,816	27,758	30,699	35,111	39,523	77
42	8.48	14,796	17,518	20,239	22,960	25,679	28,399	32,483	36,564	78
43	9.18	13,510	15,994	18,479	20,963	23,447	25,931	29,656	33,382	80
44	9.53	12,946	15,328	17,709	20,090	22,471	24,852	28,421	31,995	80
45	10.03	12,220	14,467	16,714 15,995	18,961	21,208	23,455	26,826	30,197	81
46	10.43	11,693	13,845		18,143	20,296	22,446	25,671	28,896	81
47 48	10.93 11.38	11,097 10,610	$13,135 \\ 12,561$	15,178 $14,513$	17,220 16,464	19,261	21,302	24,363 $23,293$	27,422	82 82
	12.03	10,010	11,812			18,413 17,316	20,366		26,220	
49 50	12.03		11,812 $11,245$	$13,645 \\ 12,992$	15,482 14,738	16,485	19,149 18,232	21,902 $20,852$	24,654 $23,472$	83 83
50 51			11,245 $10,730$	12,992 $12,394$		15,730	17,394			83
	13.13				14,062			19,894	22,394	
52 53	13.93 14.63		10,059	11,622 11,019	13,183 12,500	14,747 13,982	16,309 15,463	18,651 $17,685$	20,997 19,906	84 85
53 54	15.28			10,513	12,500	13,339	15,463 $14,753$	16,873	18,993	85
55	15.28			10,017	11,364	12,711	14,755	16,077	18,098	85
56	16.78			10,017	10,783	12,711 $12,061$	13,339	15,256	17,172	85
50 57	17.58				10,783	12,061 $11,475$	12,690	15,256 $14,514$	16,338	86
58	18.43			/	10,209	10,909	12,090	13,801	15,535	86
58 59	19.28					10,398	12,000	13,801 $13,153$	14,808	86
60	19.28					10,398 $10,121$	11,194	12,802	14,411	86
61	13.10					10,121	11,134	12,002	14,411	86
62										86 87
63										87
64										87
64 65										87 87
66										88
67										88
68										88 88
69										88
70										89
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TEXASLIFE INSURANCE

VOLUNTARY LIFE INSURANCE EMPLOYER AGREEMENT

Texas Life Insurance Company ("Texas Life") and the employer identified below ("Employer"), are discussing the possibility of, or have already agreed for Texas Life to provide certain insurance benefits for the Employer's eligible employees and dependents via a payroll deduction program for payment of premiums for Texas Life's voluntary life insurance contracts selected by each such employee (the "Program"). Employer will deduct from the salary or wages of all participating Employees the premiums for their contracts and remit the amount deducted to Texas Life at its home office in Waco, Texas, on the Common Due Date, as indicated below.

Employer may designate other third parties to assist Employer with the Program, including a broker, a plan administrator, a payroll processor or other service provider. Employer will inform Texas Life of the name and scope of services to be provided by each such third party (each, an "Employer Service Provider"). Employer, and not Texas Life, is responsible for ensuring that each Employer Service Provider has been appropriately selected and obligated to protect Employer information (including sensitive information about Employer's employees and their dependents) from unauthorized access and use. Employer authorizes Texas Life to share with each Employer Service Provider the appropriate information reasonably necessary to assist that Employer Service Provider in its performance of activities relating to the Program for Employer. Employer authorizes Texas Life to receive from each Employer Service Provider and to rely on the information provided by each Employer Service Provider relating to the Program.

Employer will hold Texas Life harmless relating to the actions or other malfeasance of its Employer Service Providers. Employer will give prompt notice to Texas Life's home office or Employer Service Provider for all participating Employee's eligibility, demographic changes, and/or payroll deduction changes.

Eligible employees will be those who have been employed for the minimum time required for the payroll deduction program selected at enrollment date or as defined in the Employer master policy issued by Texas Life, as applicable.

Texas Life will provide You or your Employer Service Provider the first Common Due Date before the end of the enrollment and furnish a detailed statement showing the individuals and total amounts due and any current changes.

To assist Texas Life in complying with customer identification requirements of the USA Patriot Act, the Employer states that: (1) any Employee census information provided to Texas Life was accurate, to the best of the Employer's knowledge, when given, and (2) the Employer has confirmed the identity of each Employee at hiring, or otherwise, by viewing a government-issued photographic identification document.

This agreement may be terminated at any time by the Employer or by Texas Life upon furnishing the agreed upon time frame as defined in the employer master policy or 90 days written notice, whichever is first. If this agreement is terminated, Employer shall remit to Texas Life all full premiums deducted prior to the termination date. In the event deductions for any particular contract are to be discontinued on other than a Common Due Date, the amounts already withheld from pay, if any are to be refunded to the Employee, and Texas Life is to be notified as provided above.

Common Due Date: First day each calendar month

EMPLOYER

Printed Employer Name:		
Ву:		
Printed Name:		
Title:	_	
Date		

Texas Life enters into arrangements with entities (Intermediaries) that may participate in the sale of its products. Texas Life may pay the Intermediary base commission for the sale and renewal of the products and may pay additional compensation such as payments, fees, commissions, awards, overrides, bonuses, contingent commissions, loans, gifts, prizes or other valuable consideration. If you would like further information, ask your Intermediary or Texas Life for details.

TEXASLIFE INSURANCE COMPANY

SIGNATURE CARD

Policy No.

Please complete and return quickly to allow processing of the insurance application.

I understand that an application on my life has been submitted to Texas Life Insurance Company and I consent to having a policy issued.

Employer Name	
Employee's Name	
Dependent's/Spouse's Name	
D 1 1/10 1 0 1 1 0 1 1 1 1	
Dependent's/Spouse's Social Security Number	r
Dependent's/Spouse's Date of Birth:	
X	
Signature of Dependent/Spouse	Date

Form No. 16N051 R12/18