(Company Name and Address)

PART A – CURRENT POLICY INFORMATION

Form OIR-DO-1180

PLEASE READ CAREFULLY. This information has been prepared for you so that you may make an informed decision on the use of any of your policy values to fund the purchase of a new policy. Please see the reverse side of this form for explanatory notes and instructions as to how this form has been completed.

∀ LIFE

∀ ANNUITY

Policyowner's Name:	Policy Number:	
Current Death Benefit: \$	Current Premium Amount: \$	Mode of Payment:
		Dividend Value: \$ used to purchase the policy proposed in
PART B – PROPOSED POLI	ICY INFORMATION	∀ ANNUITY
Initial Death Benefit: \$	Proposed Premium Amount: \$	Mode of Payment:
Proposed Effective Date:	Premium Payable to Age:	or forYears
request a <u>WRITTEN</u> comparison to illustrate the policy values fo	or both policies.	he proposed policy. The comparison is
	IDING FOR THE PROPOSED POLICY	
A loan in the amount of \$(mode), bearing a curre	ent loan interest rate of%.	value of your CURRENT POLICY each
A partial surrender in the amount each(mode).	of \$ will be taken from	m the value of your CURRENT POLICY
A dividend withdrawal in the amount POLICY each(mode	unt of \$ will be take).	en from the value of your CURRENT
PART D – YOUR CURRENT	POLICY COULD TERMINATE	
	ENT POLICY are used as a source of JRRENT POLICY will terminate on	funding for the purchase of an additional (date).
	making premium payments for the PRO ount of \$ to be paid ea	OPOSED POLICY from your own funds ach(mode).
you will need to begin making pre change. Estimates as to dates where the change is the change in the change is the change in the change is the change in the change in the change is the change in the change in the change is the change in the change in the change is the change in the change in the change is the change in the change in the change is the change in the change in the change is the change in th	mium payments from your own funds then policies will terminate or payments and such calculations are based upon the	e over time, the estimated date upon which for the PROPOSED POLICY may also is must begin assume the continuation of the assumption that any premiums or
Policyowner Signature:		Date:
Agent or Company Officer Signate	ure:	Date:
Florida Licensed Agent ID No. or	Corporate Title:	

(see reverse side for instructions)

POLICY DISCLOSURE FORM AND INSTRUCTIONS COMPLETE ONE FORM FOR EACH PREVIOUSLY ISSUED POLICY. ANY REQUIRED REPLACEMENT AND SALES FORMS MUST ALSO BE COMPLETED. ONE COPY IS DELIVERED TO THE POLICYOWNER AND ONE COPY MAINTAINED BY THE INSURER.

Any and all information applicable to the transaction shall be fully and completely disclosed on Form OIR-DO-1180. If the information requested does not apply to the transaction, the words "not applicable" or "N/A" shall be entered.

PART A

The information to be disclosed in Part A of Form OIR-DO-1180 shall apply to the current, in-force policy for which policy values are being utilized as a source of funding for the purchase of additional insurance contract(s). For purposes of this form, "current death benefit" is defined as the sum of the death benefit payable under the base policy, all life insurance riders covering the principal insured (other than special contingency death riders), paid-up additional insurance and dividends, minus outstanding indebtedness. The term "cash surrender value" is defined as the cash value of the policy or contract net of any outstanding indebtedness and surrender charges, and less any dividend value. The term "paid-up addition value" is defined as the cash value of additional insurance purchased with policy dividends. The term "dividend value" is defined as the total cash value of all policy dividends left on deposit with the company to accumulate at interest.

PART B

The information to be disclosed in Part B of Form OIR-DO-1180 shall apply to the proposed additional insurance contract(s) being funded by policy values in a current, in-force policy. For purposes of this form, "proposed premium amount" is defined as any recurring payment, which is planned to be paid, or which is required to be paid under the proposed policy.

PART C

The information to be disclosed in Part C of Form OIR-DO-1180 shall apply to the current, in-force policy, and shall indicate the manner in which the policy values are being used to fund the purchase of the proposed policy. Part C is <u>not</u> to be completed if the current policy is totally surrendered. However, in the event of a total surrender the current policy, Parts A, B, D, and the signature block of this form must still be completed.

When completing Part C of this form, each and every source of funding for the proposed policy must be identified, i.e., whether a policy loan, partial surrender, or dividend withdrawal or any combination thereof is being utilized. If more than one source of funding will be utilized to fund the initial and/or future premiums for the proposed policy, all applicable sections of Part C shall be completed.

For purposes of this form, a "partial surrender" is defined as any amount taken from the value of the current policy which is less than the total cash value available under such policy. The term "mode" is defined as the frequency upon which a policy loan, partial surrender or dividend withdrawal will be taken from the value of the current policy. In the event of a single loan, surrender or withdrawal, the words "one time only" shall be entered in the space provided. The term "loan interest rate" is defined as the rate of interest in effect on the date that this form is completed, as specified in the current policy contract.

PART D

The information to be disclosed in Part D of Form OIR-DO-1180 shall apply to the current, in-force policy and the proposed additional policy, respectively.

SIGNATURES

In order to evidence that the required disclosure has been made, Form OIR-DO-1180 shall be signed and dated by the soliciting agent or by a Corporate Officer, as well as by the policyowner. For identification purposes, the agent or Corporate Officer shall enter his or her Florida License Number or Corporate title, respectively, in the space provided.

Form OIR-DO-1180