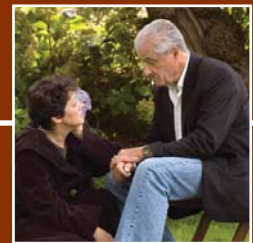


# Ultra Protector Series

Final Expense Made Easy

## Agent Guide

Policy Series 281/282/283



- ▶ Three products to fit each client's situation
- ▶ Guaranteed coverage<sup>1,2</sup>
- ▶ Guaranteed level premiums
- ▶ Simple application process

For agent use only.  
Not for public use.

**AMERICO**

# Americo Contact Information

**Americo.com:** Access product information, forms, and consumer-friendly information, and download quote software at our agent website, [www.americo.com](http://www.americo.com).

**Sales Support:**  
800.231.0801, ext. 8410,  
Monday – Friday 8:00 A.M.  
to 5:00 P.M., central, or  
[salesupport@americo.com](mailto:salesupport@americo.com)

**Agent Contact Center:**  
800.231.0801 or  
[pending.business@americo.com](mailto:pending.business@americo.com)  
Monday – Friday 8:00 A.M.  
to 5:00 P.M., central.

**Underwriting:** Have a special situation? Refer to [americo.com](http://americo.com) or the Field Underwriting Guide. For specific underwriting questions, contact an underwriter directly through the Agent Contact Center at 800.231.0801.

For faster issue, fax Underwriting and Delivery Requirements to 800.395.9238.

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<sup>1</sup> Subject to issue age limits.

<sup>2</sup> State variations apply.

<sup>3</sup> Application contains medical questions, but no medical exam is required.

Everyday, families are faced with the difficult task of saying goodbye to loved ones.

## the need for final expense

Funerals are one of the most expensive purchases many people will ever make. A traditional funeral, including a casket and vault, costs about \$6,000, although extras like flowers and obituary notices can add thousands of dollars to the total cost. Many funerals can run well over \$10,000. (Source: Funerals: A Consumer

Guide, Federal Trade Commission, June 2000, [www.ftc.gov](http://www.ftc.gov))

Many people do not want to leave this financial burden on their families upon their death. A whole life insurance policy, like Ultra Protector Series, can be a great way for your clients to protect their families from the costs of final expenses. A few questions you may want to ask your clients:

- ▶ How will your bills and funeral expenses be paid?
- ▶ Who will pay for any hospital or outstanding medical bills?
- ▶ Could your family afford to pay these bills without sacrificing their retirement or other savings?

You may wish to use the client worksheet (07-277-3) to help clients determine just how much coverage they may need for their final expenses.



## Why sell Ultra Protector Series?

Ultra Protector Series is a series of whole life insurance products designed to help cover the costs associated with funeral and burial expenses, unpaid medical bills, or other financial obligations that your clients family may face when he or she dies.

- ▶ Three products to fit different situations:
  - Ultra Protector I – full death benefit
  - Ultra Protector II – 2-year graded death benefit
  - Ultra Protector III – 3-year graded death benefit<sup>2</sup>; guaranteed issue
- ▶ Full death benefit payable for accidental death
- ▶ Face amounts from \$2,000 to \$30,000
- ▶ Children's Term and Terminal Illness Accelerated Benefit Riders available on Ultra Protector I<sup>2</sup>
- ▶ Coverage cannot be cancelled because of age or health
- ▶ Simple application process
- ▶ No medical exams – just a few simple questions to answer<sup>3</sup>
- ▶ Every client can qualify for coverage<sup>1,2</sup>
- ▶ Guaranteed level premiums
- ▶ Quick issue – 4-day turnaround on clean applications

<sup>1</sup> Subject to issue age limits. <sup>2</sup> State variations apply. <sup>3</sup> Application contains medical questions, but no medical exam is required.

# Ultra Protector Series

Three products to fit individual situations

	Ultra Protector I	Ultra Protector II	Ultra Protector III
<b>Minimum Face Amount</b>	\$2,000		
<b>Maximum Face Amount</b>	\$30,000		\$10,000
<b>Issue Ages, age last birthday</b>	Non-smoker: 50 – 85 Smoker: 50 – 80	50 – 80	50 – 75
<b>Death Benefit</b>	Level death benefit	2-year graded death benefit	3-year graded death benefit (2 years in select states, see Americo.com for details)
<b>Death Benefit Descriptions</b>	Full death benefit day one	<p><b>Year 1:</b> Death Benefit equals return of premium plus 5%</p> <p><b>Year 2:</b> Death Benefit equals the greater of return of premium plus 10% or 50% of the face amount</p> <p><b>Year 3+:</b> Death Benefit equals 100% of the face amount</p> <hr/> <p>An accidental death benefit provision is included at no additional cost.</p> <p>If death occurs as a result of an accident during the first 2 years, the full death benefit will be payable.</p>	<p><b>Year 1:</b> Death Benefit equals return of premium plus 5%</p> <p><b>Year 2:</b> Death Benefit equals return of premium plus 10%</p> <p><b>Year 3:</b> Death Benefit equals 75% of the face amount (100% in select states)</p> <p><b>Year 4+:</b> Death Benefit equals 100% of the face amount</p> <hr/> <p>An accidental death benefit provision is included at no additional cost.</p> <p>If death occurs as a result of an accident during the first 3 years (2 years in select states), the full death benefit will be payable.</p>
<b>Available Riders and Additional Features</b>	<p>Accelerated Benefit Payment Rider (Rider Series 2146) included at no additional cost.</p> <p>Children's Term Rider (Rider Series 2147) available for \$11 per \$1,000 annually.</p>	<p>No riders available</p> <p>Full death benefit payable for accidental death during graded death benefit period.</p>	
<b>Policy Fee</b>	\$40 annual policy fee (non-commissionable) (modal factors apply)		
<b>Underwriting Classes</b>	Non-smoker/Smoker Male/Female	Male/Female	
<b>Premium Modes</b>	Annual (1.00) and Monthly PAC (.095)		
<b>Application</b>	Application included in client brochure 07-277-2. State variations exist. Series 5099.		
<b>Policy Description</b>	Nonparticipating, level premium product with premiums payable to age 100 and protection provided until the insured's attained age 120. The policy will endow at age 120 (cash value will equal the face amount at age 120).		

← Ultra Protector I has a full death benefit day one.

Ultra Protector II has a graded death benefit for the first 2 policy years.

Ultra Protector III has a graded death benefit for the first 3 policy years (2 years in select states).

# Ultra Protector Series at a Glance

## Issue Ages:

Ultra Protector I:  
Non-smoker: 50-85  
Smoker: 50-80

Ultra Protector II: 50-80

Ultra Protector III: 50-75  
age last birthday

## Minimum Face Amount:

\$2,000

## Gender:

Male/Female (Unisex in MT)

## Premium Modes:

Annual: 1.00  
Monthly PAC: 0.095

## Application:

Series 5099

## Annual Policy Fee:

\$40 (non-commissionable)

## Additional Information

### Non-smoker Classification

A non-smoker is defined as a person who has not smoked cigarettes for at least 12 months prior to the completion date of the application. Smokeless tobacco, cigar, and pipe smoking qualify as non-smoker.

### Policy Loans

Policy loans may be available. If available, the loan interest will be charged in advance at a fixed rate of 7.4% per year, compounded annually. This is equivalent to an effective annual rate of 8.0% when payable in arrears. Policy loans will impact policy performance. When policy loans and interest on the loans are greater than the policy's cash value, the policy will terminate. State variations apply.

### Non-Forfeiture Options

After the policy has a cash value, and if any premium remains unpaid after the grace period, the non-forfeiture options available for Ultra Protector I, Ultra Protector II, and Ultra Protector III are cash surrender and reduced paid up insurance. The automatic option will be reduced paid up insurance.



## Client Materials

Americo offers a full range of client-approved materials to assist you in the sale. You can order or download these materials from Agent Cafe, [www.americo.com](http://www.americo.com).

- Brochures
- Worksheets
- Presentations
- Pre-approved advertising
- Final Wishes Planning Guide
- Spanish materials

# Riders & Additional Benefits

## Accelerated Benefit for Terminal Illness

Rider Series 2146

For Ultra Protector I, an Accelerated Benefit Payment Rider is included at no additional cost.

With this benefit, if the insured is diagnosed with a qualified terminal illness that results in a life expectancy of 12 months or less (24 months or less in IL, MA, and TX), Americo will advance up to 50% of the death benefit payable under the policy. The available benefit will be reduced by the amount of any outstanding policy loans, and will not exceed \$15,000. The minimum accelerated benefit is \$1,000 (state variations apply).

There is no premium for this rider. At the time your client receives the accelerated benefit payment, an administrative fee of up to \$250 will be assessed against the policy, and a lien in the amount of the accelerated benefit payment and the administrative fee will be imposed on the policy. Only one acceleration per policy is permitted. The company will charge interest on the policy lien.

Please refer to the Disclosure Statement for the Accelerated Benefit Payment Rider for details regarding the effect of the accelerated benefit payment on the policy. Please ensure the proposed insured and owner acknowledge receipt of the Disclosure Statement.

## Accidental Death Provision

For Ultra Protector II and III, an accidental death benefit provision is included in the policy.

With this benefit, if death occurs as the result of an accident during the graded death benefit period, the full death benefit is payable.

## Children's Term Rider

Rider Series 2147

For Ultra Protector I, a Children's Term Rider is available.

This rider provides level term life insurance on any natural or legally adopted child, stepchild, or dependent grandchild of the insured named in the application, provided the child is 16 years of age or younger on the date of application. After the date of application, the rider will include any child born to the insured or legally adopted by the insured, provided the child is 16 years of age or younger at the time of adoption. No child will be insured before he/she is 15 days old.

The Children's Term Rider is issued in units of \$1,000 of level term life insurance. The maximum amount is equal to the lesser of (a) the face amount of the policy to which the rider is attached or (b) \$5,000. The Children's Term Rider costs \$11 per \$1,000 annually.

Coverage on each child terminates on the child's 23rd birthday or the coverage anniversary nearest the insured's 65th birthday, whichever comes first. If the insured dies while this rider is in force, the level term life insurance on each child becomes fully paid-up term insurance.

Conversion to a new policy is available on the child's 23rd birthday or the coverage anniversary nearest the insured's 65th birthday, whichever comes first. Conversion to a permanent policy of insurance is permitted for up to four times the amount of coverage in force on the child. The coverage may be converted to a policy offered by Americo at the time of conversion, and will not require evidence of insurability.

Some riders are optional and available at an additional cost. Riders may not be available in all states.

# Underwriting

The products are issued on an Accept/Reject basis according to health questions on the application. MIB will be required and in some circumstances a PHI will be required. Americo requires agents meet with all proposed insureds for Ultra Protector Series.

Acceptable Weight Ranges for Stated Heights for both Males and Females (Unisex)

Height	Weight (lbs.)
4'8"	74-185
4'9"	76-192
4'10"	79-199
4'11"	82-206
5'	84-213
5'1"	87-220
5'2"	90-228
5'3"	93-235
5'4"	96-243
5'5"	99-250
5'6"	102-258
5'7"	105-266
5'8"	109-274
5'9"	112-282
5'10"	115-291
5'11"	118-299
6'	122-308
6'1"	125-316
6'2"	129-325
6'3"	132-334
6'4"	136-343
6'5"	139-352
6'6"	143-361
6'7"	146-371

## Ultra Protector I

Ultra Protector I will be issued if:

- ✓ all health questions on the application are answered “no” (both parts 1 and 2)
- ✓ height and weight are within guidelines
- ✓ MIB records are clear or provide no information that is inconsistent with health history given on the application

## Ultra Protector II

Ultra Protector II will be issued if:

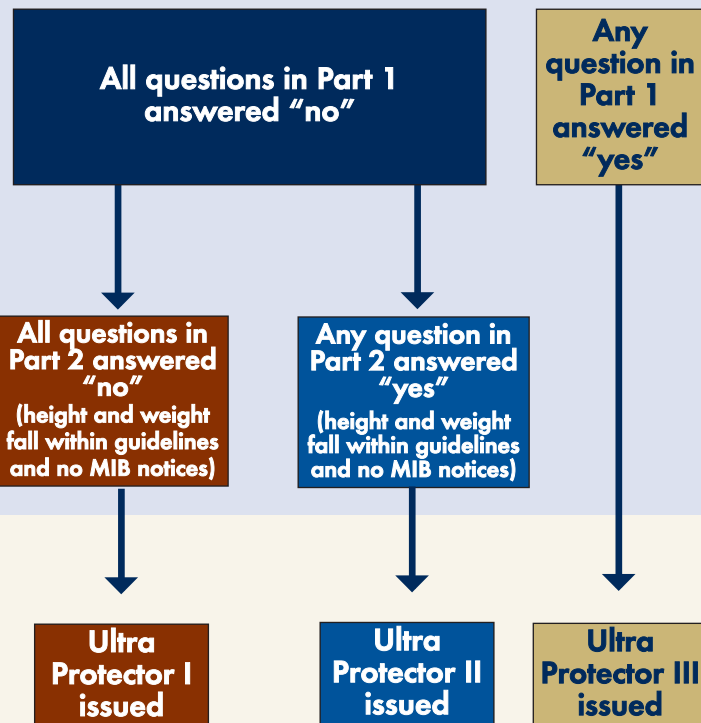
- ✓ all health questions in Part 1 are answered “no”
- ✓ one or more health questions in Part 2 are answered “yes”
- ✓ height and weight are within guidelines
- ✓ MIB records are clear or provide no information that is inconsistent with health history given on the application

## Ultra Protector III

Ultra Protector III will be issued if:

- OR
- ✓ no health questions are answered on the application
- OR
- ✓ any “yes” answers are reported in Part 1 of the application
  - ✓ applicant does not qualify for Ultra Protector I or II and agrees that they are willing to accept any Ultra Protector product (section 4 of application)

# Underwriting Flow Chart



PART 1	Yes	No
1. Is the Proposed Insured currently: hospitalized, bedridden, confined to a nursing facility, receiving hospice or home health care, using oxygen to assist in breathing, confined to a wheelchair, using a walker, waiting for an organ transplant, diagnosed with a terminal illness, paralyzed, or has the Proposed Insured been declined for life insurance within the last 6 months? .....	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the Proposed Insured ever:		
a. Had, been told they have, been treated for, or been prescribed medication for: Alzheimer's disease, dementia, memory loss, muscular dystrophy, or ALS (Lou Gehrig's Disease)? .....	<input type="checkbox"/>	<input type="checkbox"/>
b. Been diagnosed as having, been treated by a medical professional for, or tested positive for: Acquired Immune Deficiency Syndrome (AIDS), AIDS-Related Complex (ARC), or the Human Immunodeficiency Virus (HIV)? .....	<input type="checkbox"/>	<input type="checkbox"/>
3. a. In the past 5 years, has the Proposed Insured been told they have or been treated by surgery, chemotherapy, radiation, or prescribed medication for: leukemia or lung, colon, bladder, or breast cancer? .....	<input type="checkbox"/>	<input type="checkbox"/>
b. In the past 3 years, has the Proposed Insured been told they have, or been treated by surgery, chemotherapy, radiation, or prescribed medication for any other internal cancer or malignant melanoma (not basal cell skin cancer)? .....	<input type="checkbox"/>	<input type="checkbox"/>
4. In the past 12 months, has the Proposed Insured had, been told they have, been treated for, or been prescribed medication or had surgery for: heart bypass, angioplasty (balloon procedure), stent placement, heart valve disorder, heart attack, or angina (chest pain)? .....	<input type="checkbox"/>	<input type="checkbox"/>
5. In the past 2 years, has the Proposed Insured had, been told they have, been treated for, or been prescribed medication or had surgery for:		
a. Congestive heart failure, stroke, circulation or blood clot problems in the legs or to the heart or brain, systemic lupus, chronic kidney disease, or kidney failure? .....	<input type="checkbox"/>	<input type="checkbox"/>
b. Drug or alcohol abuse/dependency or addiction? .....	<input type="checkbox"/>	<input type="checkbox"/>
6. Has the Proposed Insured been told they have, been treated for, or taken medication for diabetes in combination with stroke or TIA, heart disease, or circulatory disease? .....	<input type="checkbox"/>	<input type="checkbox"/>

PART 2	Yes	No
1. In the past 2 years, has the Proposed Insured ever been told they have, been treated for, or been prescribed medication for: Parkinson's disease, cirrhosis of the liver, chronic hepatitis, or other liver diseases or disorders? .....	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the Proposed Insured have diabetes requiring insulin, diagnosed prior to age 50? .....	<input type="checkbox"/>	<input type="checkbox"/>
3. In the past 2 years, has the Proposed Insured:		
a. Experienced complications of diabetes including: amputation, eye or kidney problems, insulin shock, or diabetic coma? .....	<input type="checkbox"/>	<input type="checkbox"/>
b. Experienced periods when their blood sugar was not controlled (in excess of 175)? .....	<input type="checkbox"/>	<input type="checkbox"/>
4. In the past 2 years, has the Proposed Insured had, been told they have, been treated for, or been prescribed medication or had surgery for: heart bypass, angioplasty (balloon procedure), stent placement, heart valve disorder, heart attack, angina (chest pain), coronary disease, or multiple sclerosis? .....	<input type="checkbox"/>	<input type="checkbox"/>
5. In the past 2 years, has the Proposed Insured had, been told they have, been treated for, or been prescribed medication for: emphysema, chronic bronchitis that is not seasonal, or any other chronic respiratory or lung problem excluding allergies or asthma? .....	<input type="checkbox"/>	<input type="checkbox"/>

# Underwriting Frequently Asked Questions

## Why would my client check the box in Section 4 to accept any coverage?

By checking this box, your client authorizes Americo to issue any Ultra Protector product for which he/she qualifies. This will result in fewer amendments to policies.

If this box is checked, the policy will be issued at the maximum face amount available for the selected premium. Be sure to check “solve for face amount” in order to keep the premium at the same amount as originally quoted. This option may not be available in all states.

Ultra Protector I    Ultra Protector II    Ultra Protector III

Check here if you are willing to accept any Ultra Protector product for which you qualify based on this application. The insurance for which you qualify may have a graded death benefit for the first 2 or 3 years, a face amount less than any indicated on this application, and riders may not be available. All premiums will be applied toward the insurance for which you qualify.

## Why would my client check the box for “Automatic Premium Loan”?

If this box is checked an automatic premium loan will be available to your client. An automatic premium loan means that if at the end of the grace period the premium due has not been paid, a policy loan will automatically be made from the policy’s cash value to pay the premium. The primary purpose is to prevent unintentional lapse of the policy.

If this box is not selected, the cash value will not be used to pay premiums.

## What is “MIB”?

“MIB” is an acronym for the Medical Information Bureau. This is a database that houses medical information supplied by insurance companies with permission from proposed insureds.

## What is a “PHI”?

“PHI” is an acronym for Personal Health Interview. Ultra Protector applications are selected at random to undergo a PHI. An Americo associate will call the client in order to reconfirm health questions asked during the application. No additional questions are asked during this interview.

## When is the Accelerated Benefit Payment Disclosure form needed?

This form is only needed when your client applies for Ultra Protector I (subject to rider availability by state).

## What should my client include in Section 7 (Health Question Details)?

This section is provided for your client to explain any further details for any “yes” answers in the health question sections or if your client wants to give more detail. The more detailed information provided, the easier it is to underwrite the application.

## How do I submit applications?

Submit new business applications by faxing the applications with the Faxed Application Transmittal Form (#AFSFAX2002) to 800.395.9261. A maximum of eight applications may be sent per transmittal form. Please retain the original application(s) for your files - do not mail.

# New Business Information

## Completing the Application

- ▶ Print clearly and use black ink.
- ▶ Answer all questions thoroughly.
- ▶ Make sure that you have all of the required forms for your product and state.
- ▶ Note special requests such as effective date, draft date, save age, issue family members together in the Agent Comments section of the application.
- ▶ Double check for correct signatures, agent number, and dates.
- ▶ The Payor section of the application is not necessary unless the Payor is different than the owner or insured.

## Fax Your Application

- ▶ Use the Amerigo Fax Application Transmittal Form (#AFSEFAX2002)
- ▶ Attach the application, additional required forms and a copy of the premium check or EFT form
- ▶ Fax to: 800.395.9238
- ▶ If you provide your fax # or email address on the Fax Transmittal form you will receive a confirmation which includes the policy number within 3 business hours.
- ▶ Please do not mail the originals.

## Upload Your Application

Submit your business electronically to Amerigo's secure site.

- ▶ If your documents are not already saved electronically, scan and save them to your PC. We accept the following file types: .doc, .jpg, .pdf, .tif, .tiff, .bmp
- ▶ You can upload 5 docs at a time with a maximum size of 10 megabytes.
- ▶ The name of your documents must be 45 characters or less.
- ▶ Log on to amerigo.com and click on the "Upload Documents" link on the lower left side of the home page.
- ▶ Follow the easy instructions.
- ▶ You can also upload outstanding requirements for existing pending business. Please make sure to write a policy number on the document.

## Forms of Payment

- ▶ Please do not send cash or partial premiums.
- ▶ Amerigo will accept cashier's checks, but NOT money orders.
- ▶ We cannot process premium checks that are postdated, backdated by more than six months, or improperly endorsed. Please make sure the policy number, if you know it, is on any check sent to Amerigo.
- ▶ Personal checks written by the agent on behalf of the applicant will not be accepted.

## Drafting for Premium

Amerigo will draft for initial premium.

- ▶ If outstanding requirements are not received on a timely basis, or if you request a future effective date, we will draft for the first and second months' premium.
- ▶ If a third month is required, we will call you for approval.
- ▶ Drafting is not available on the 29th, 30th or 31st of any month.
- ▶ If your client requests a specific draft date, please write it in the Agent Comments section of the application.
- ▶ The draft date and the effective date will always be the same.
- ▶ If no specific draft date is requested, the first draft will be submitted the day the application is approved and issued.
- ▶ Some clients may prefer to write a check for the initial premium and then provide the Bank Draft Authorization form (AF55019) for monthly drafts. If this is the case, please provide a copy of the initial premium check with application if you fax or upload your documents. This will prevent us from drafting for the initial premium.
- ▶ Amerigo will draft from a checking or savings account as follows:
  - Checking accounts – include voided check
  - Savings accounts – must include a pre-printed deposit slip
  - Or, complete Amerigo's Bank Draft Authorization form (AF55019) for either type of account.

Please remember to explain the drafting process to your clients when taking an application. This will lead to fewer drafts being returned and fewer complications for you and your client.

# Rate Charts

## Ultra Protector I

Annual Target Premium per \$1,000 of Face Amount				
Issue Age	MALE		FEMALE	
	Non-Smoker	Smoker	Non-Smoker	Smoker
50	35.00	47.40	25.70	33.00
51	35.90	48.86	26.49	33.85
52	36.80	50.32	27.28	34.70
53	37.70	51.78	28.07	35.55
54	38.60	53.24	28.86	36.40
55	39.51	54.68	29.63	37.23
56	41.71	57.00	30.73	38.39
57	42.80	59.33	32.93	40.72
58	45.00	62.82	34.02	41.88
59	47.19	65.15	36.22	44.21
60	49.39	68.64	37.32	46.53
61	51.58	70.96	39.51	48.86
62	54.88	74.45	41.71	51.19
63	57.07	79.11	43.90	53.51
64	60.36	82.60	46.10	55.84
65	63.66	87.25	48.29	58.17
66	66.95	91.90	50.49	60.49
67	71.34	97.72	52.68	63.98
68	75.73	102.37	55.97	66.31
69	80.12	108.19	58.17	69.80
70	85.61	115.17	61.46	73.29
71	91.09	122.15	65.85	76.78
72	97.68	129.13	69.14	81.43
73	104.26	136.11	74.63	87.25
74	110.85	143.09	79.02	91.90
75	118.53	151.24	85.61	98.88
76	129.96	159.38	95.47	105.86
77	141.38	167.52	105.34	114.01
78	152.81	175.67	115.21	122.15
79	164.24	184.97	125.08	132.62
80	175.67	194.28	134.95	141.93
81	187.30	n/a	146.58	n/a
82	200.10	n/a	158.22	n/a
83	214.06	n/a	172.18	n/a
84	228.02	n/a	186.14	n/a
85	243.14	n/a	201.26	n/a

Add \$40 annual policy fee.  
In MT use Male rates for Unisex rates.

## Ultra Protector II

Annual Target Premium per \$1,000 of Face Amount		
Issue Age	MALE	FEMALE
50	54.20	43.60
51	55.82	44.76
52	57.44	45.92
53	59.06	47.08
54	60.68	48.24
55	62.28	49.39
56	63.93	50.76
57	68.87	52.95
58	71.61	55.15
59	75.18	58.44
60	77.92	60.64
61	82.59	63.93
62	86.70	66.95
63	91.09	69.42
64	95.76	72.71
65	100.70	75.45
66	106.46	78.20
67	112.49	82.04
68	119.35	85.61
69	121.27	89.45
70	134.17	94.11
71	142.95	98.78
72	152.83	105.36
73	162.70	112.22
74	173.41	120.73
75	185.20	130.33
76	197.82	141.85
77	211.27	154.20
78	224.71	167.64
79	239.26	181.36
80	254.89	194.26

Add \$40 annual policy fee.  
In MT use Male rates for Unisex rates.

## Ultra Protector III

Annual Target Premium per \$1,000 of Face Amount		
Issue Age	MALE	FEMALE
50	95.76	73.42
51	99.25	76.08
52	103.61	79.43
53	107.11	82.11
54	110.89	85.02
55	115.26	88.37
56	119.63	91.71
57	122.54	93.94
58	126.90	97.28
59	131.26	100.63
60	134.76	103.32
61	139.71	107.11
62	144.66	110.91
63	149.61	114.70
64	156.01	119.60
65	162.41	124.52
66	170.50	130.73
67	179.61	137.72
68	189.46	145.27
69	200.09	153.41
70	228.45	161.67
71	242.67	171.73
72	258.78	183.14
73	275.85	195.21
74	294.55	208.45
75	314.59	222.64

Add \$40 annual policy fee.  
In MT use Male rates for Unisex rates.

**How to calculate premium:**

Annual Premium Rate per \$1,000	\$	
Number of 1,000's	(x)	
<b>Premium Amount</b>	<b>\$</b>	
Annual Policy Fee	(+)	\$ 40.00
<b>Total Premium</b>	<b>\$</b>	
Modal Factor	(x)	
<b>Modal Premium</b>	<b>\$</b>	

**Modal Factors:**

Annual: 1.00  
Monthly  
PAC: .095



Americo Financial Life and  
Annuity Insurance Company  
300 W. 11th Street  
Kansas City, MO 64105

## About Americo

For over 100 years, Americo Life, Inc.'s family of insurance companies has been committed to providing the life insurance and annuity products you need to protect your mortgage, family, and future.<sup>1</sup> We listen to what you want from an insurance policy or annuity and do our best to provide a proper solution for your individual situation.

Innovative thinking has helped us build a strong financial foundation for our business. Americo Financial Life and Annuity Insurance Company (Americo) is a member of the Americo Life Inc. family of companies. Americo Life Inc., is one of the largest, independent, privately held insurance groups in the United States<sup>2</sup> with over 836,000 policies, over \$44 billion of life insurance in force, and over \$5.8 billion in assets in force for year-end 2008.<sup>3</sup>

<sup>1</sup>Americo Life, Inc. is a holding company and is not responsible for the financial condition or contractual obligations of its affiliate insurance companies.

<sup>2</sup>Admitted Assets, Top Life Writers-2008, "A.M. Best Co., as of July 2008.

<sup>3</sup>Information is as of year end 2008 on a consolidated basis for Americo Financial Life and Annuity Insurance Company and the other life insurance subsidiaries of Americo Life, Inc., unless otherwise indicated. Information is prepared on the basis of generally accepted accounting principles (GAAP).

## Important Information

Americo Financial Life and Annuity Insurance Company is authorized to do business in all states and the District of Columbia except NY and VT.

Products are underwritten by Americo Financial Life and Annuity Insurance Company (Americo), Kansas City, MO, and may vary in accordance with state laws. Some products and benefits may not be available in all states. Some riders are optional and available for an additional cost. Certain restrictions and variations apply. Consult policy and riders for all limitations and exclusions. For exact terms and conditions, please refer to the contract.

The company reserves the right to contest coverage for up to two years due to any misrepresentations in the application. If the insured, sane or insane, dies by suicide while the contract is in force and within two years (one year in Colorado, Missouri, and North Dakota) after the issue date, the proceeds payable will be limited to the sum of premiums paid, less any indebtedness. See Missouri contract for special provisions regarding suicide.

Neither Americo Financial Life and Annuity Insurance Company nor any agent representing Americo Financial Life and Annuity Insurance Company is authorized to give legal or tax advice. Please consult a qualified professional regarding the information and concepts contained in this material.

Any illustrations of future value used in a sales presentation are provided only for illustrative purposes. Any such illustration must not be regarded as guaranteed or as estimated future performance unless it is based solely on the minimum guaranteed interest rates.