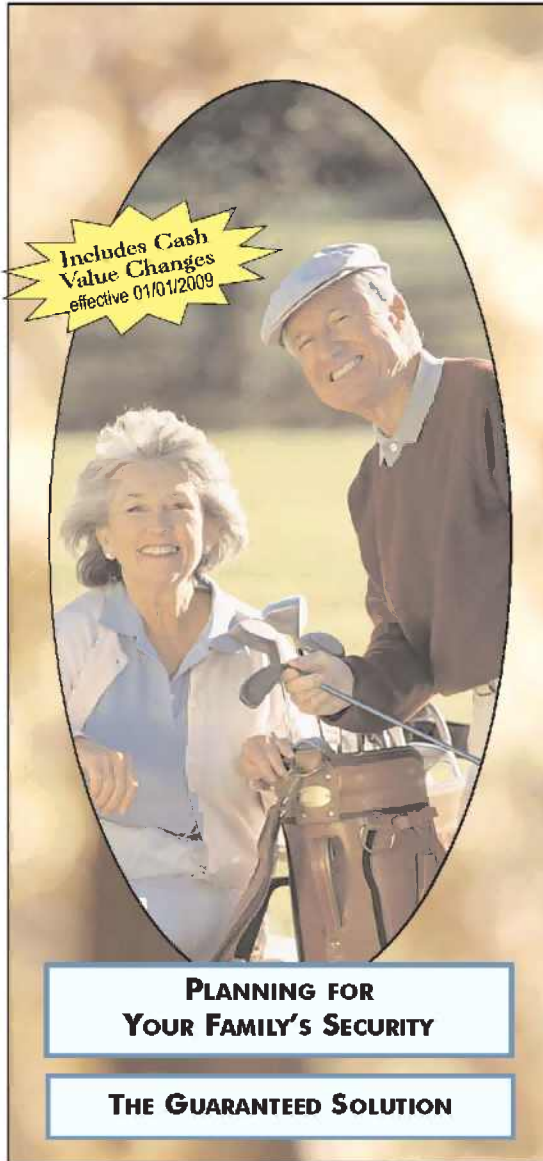


# GBL

GRADED BENEFIT LIFE INSURANCE

*For Agent Use Only*

GRADED BENEFIT LIFE



**Includes Cash Value Changes effective 01/01/2009**

**PLANNING FOR YOUR FAMILY'S SECURITY**

**THE GUARANTEED SOLUTION**

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## Presidential Life Insurance Company

In Texas doing business as  
**Rockland Life Insurance Company**

Nyack, New York 10960  
1-800-926-7599 or 1-888-PRES LIF  
[www.presidentiallife.com](http://www.presidentiallife.com)



## Presidential Life's Graded Benefit Life (GBL)

The Graded Benefit Life policy offers individuals who are either very highly rated or uninsurable and unable to obtain life insurance at standard rates an opportunity to obtain permanent, non-participating whole life coverage on a guaranteed issue basis. Death benefits under the policy are limited in the event of death from other than accidental causes during the first two or three policy years, depending on age at issue.

### GUARANTEED ISSUE

No medical questions  
No medical examinations  
No medical tests

### POLICY BENEFITS

The policy death benefit is the full face amount of the policy, except during the first two or three policy years, as described below:

#### Issue age between 40 - 64

Benefits payable during the first 3 policy years, except when death results from accidental causes, are limited to premiums paid plus 5% compounded annually.

#### Issue age 65 or older

Benefits payable during the first two policy years, except when death results from accidental causes, are limited to premiums paid plus 5% compounded annually.

#### Accidental Death

If death during the applicable 2- or 3- year limited-benefit period results from accidental causes, the policy death benefit will be premiums paid plus 5% compounded annually plus an additional sum equal to the policy face amount.

### POLICY ISSUE AGES

MO: 40-75 NY: 50-75

NJ: 65-78 Male

NJ: 65-80 Female

All other states: 40-80

### Issue ages based on age nearest birthday

(Not approved in AR, KS, MN, NH, and WA.)

MINIMUM FACE AMOUNT: \$2,000

MAXIMUM FACE AMOUNT: \$50,000

### MODAL PREMIUM FACTORS

(Multiply the annual premium by the appropriate factor)

Semi-annual .52

Quarterly .265

Check-O-Matic .09

### LIMITATIONS

Pennsylvania: Issue of GBL must follow declination based on submission and review of regular application Parts I and II.

### POLICY ISSUE GUIDELINES

1. The application must be signed in the state in which the insured resides. "Out-of-state" applications are not acceptable. In addition, the application must be completed during a face-to-face meeting between the agent and the insured. This policy is not filed as a "mail order" product.
2. The applicant/insured must be able to sign the application in his or her personal signatory capacity. Applications signed by the holder of a Power-of-Attorney will not be accepted. An applicant may make his or her mark (as opposed to his or her signature), in which case, an explanation of why the individual was unable to sign his or her name (viz. severe palsy) must accompany the application.

3. An individual who is a patient or a resident in any form of health care or nursing home facility is not eligible for coverage.
4. Funeral home and burial societies may not be a party to the application, nor may either of these be named as a policy beneficiary.
5. Premiums are calculated based on **age nearest** birthday and the first full gross modal premium chosen should be submitted at the time of application.
6. Monthly premium payment is available only through (check-o-matic) automatic electronic debit from a checking or savings account.

To establish check-o-matic premium payment requires completion of a Direct Debit Authorization form. Electronic monthly payments drawn on the policy issue date (between the 1st to 28th of each month).

7. If premiums are to be paid monthly, two months' premium must accompany the application when submitted.
8. Pennsylvania Reg Title 31 requires that we receive certification from the agent that Appendix A "Appendix A Disclosure Statement Delivery Receipt" was given to the applicant no later than at the time that the application was signed by the applicant. Please note that Pennsylvania requires a regular Application Part I and a non-medical Part II to be submitted and declined before the GBL application and premium are submitted.
9. **All GBL's must be submitted on a pre-paid basis and we cannot accept post-dated checks. No money orders greater than \$500 will be accepted. No third party checks.**

### COMPENSATION CHARGEBACK POLICY

The death of the insured during the first six months following policy issue results in a 100% chargeback.

The death of the insured during the next six months results in a 50% chargeback.

### REINSTATEMENT GUIDELINE

Reinstatement following policy lapse requires submission of a reinstatement application for review. The policy will be reinstated if the applicant meets certain requirements. For additional information on reinstatement requirements, contact Presidential Life medical underwriting department.

### Guaranteed Issue Graded Benefit Life

*Issue ages based on age nearest birthday.*

<u>STATE</u>	<u>ISSUE AGES</u>	<u>STATE</u>	<u>ISSUE AGES</u>
Alabama	40-80	Nebraska	40-80
Alaska	40-80	Nevada	40-80
Arizona	40-80	New Jersey	65-78 Male 65-80 Female
California	40-80	New Mexico	40-80
Colorado	40-80	New York	50-75
Connecticut	40-80	North Carolina	40-80
Delaware	40-80	North Dakota	40-80
DC	40-80	Ohio	40-80
Florida	40-80	Oklahoma	40-80
Georgia	40-80	Oregon	40-80
Hawaii	40-80	Pennsylvania	40-80
Idaho	40-80	Rhode Island	40-80
Illinois	40-80	South Carolina	40-80
Indiana	40-80	South Dakota	40-80
Iowa	40-80	Tennessee	40-80
Kentucky	40-80	Texas	40-80
Louisiana	40-80	Utah	40-80
Maine	40-80	Vermont	40-80
Maryland	40-80	Virginia	40-80
Massachusetts	40-80	West Virginia	40-80
Michigan	40-80	Wisconsin	40-80
Mississippi	40-80	Wyoming	40-80
Missouri	40-75		
Montana	40-80		

Please reference the Products Approval Listing and Special State Forms Listing for updated form requirements.

All forms are available on our website [www.presidentiallife.com](http://www.presidentiallife.com) or contact our supply department at (800) 926-7599 x462.

### CASH VALUES

Per \$1,000 - Ultimate Amount

Male Age <sup>(1)</sup>	10th Yr Cash Value	20th Yr Cash Value	Female Age <sup>(1)</sup>	10th Yr Cash Value	20th Yr Cash Value
40	97	250	40	82	210
41	102	260	41	86	218
42	107	270	42	90	227
43	112	281	43	94	235
44	118	291	44	98	244
45	124	302	45	103	253
46	130	313	46	107	262
47	135	324	47	111	271
48	141	335	48	116	281
49	148	346	49	121	292
50	154	358	50	126	302
51	161	371	51	131	313
52	168	383	52	136	325
53	175	396	53	142	337
54	182	409	54	148	349
55	189	422	55	154	361
56	196	436	56	160	374
57	204	450	57	167	387
58	212	463	58	175	400
59	220	477	59	182	414
60	229	491	60	190	428
61	239	505	61	198	442
62	251	520	62	207	457
63	263	534	63	215	471
64	275	548	64	224	485
65	274	553	65	225	494
66	286	566	66	234	508
67	299	579	67	245	523
68	312	590	68	257	538
69	324	601	69	268	553
70	337	611	70	281	567
71	349	621	71	293	582
72	361	631	72	306	601
73	373	642	73	319	623
74	385	654	74	331	647
75	396	670	75	344	674
76	407	691	76	357	706
77	418	724	77	370	745
78	428	774	78	383	798
79	437	858	79	396	878
80	446	1000	80	408	1000

(1) Age at policy issue  
For unisex cash values call Home Office.

### GRADED BENEFIT POLICY

Per \$1,000 - Ultimate Amount

Issue Age Male and Female and Unisex	Annual Premium*
40	52.35
41	53.41
42	54.47
43	55.53
44	56.59
45	57.65
46	58.71
47	59.77
48	60.83
49	61.89
50	62.95
51	64.01
52	65.07
53	66.30
54	67.71
55	69.30
56	71.07
57	73.05
58	75.06
59	77.10
60	79.18
61	81.30
62	83.47
63	85.84
64	88.51
65	96.73
66	101.23
67	106.23
68	110.82
69	117.06
70	124.31
71	131.12
72	138.63
73	147.08
74	155.90
75	165.90
76	174.80
77	185.98
78	197.16
79	210.06
80	222.10

#### \*ADD \$35 POLICY FEE

For modes other than annual, multiply the annual premium by:	Semi-Annual	.52
	Quarterly	.265
	Check-O-Matic	.09

Refers to Policy Form L-57