



“Good Future” Insurance

TERMS AND CONDITIONS

ENDOWMENT INSURANCE

G.C.Life Product Code: 8

1. Composition of Insurance Contract

“Good Future” Insurance (hereinafter referred to as “the Contract”) is composed of the insurance certificate, terms and conditions, application form including “Confirmation of Electronic Insurance Application”, health condition disclosure, insurance plan, and other documents related to the Contract.

2. Creation and Effectiveness of the Insurance Contract

The applicant submits an application and completes the application procedures, the Company notifies the applicant to make a premium payment after the Company underwrites the insurance, and then the Contract is created.

After the creation of the Contract and the full payment of the initial premium, the Contract shall enter into effect. The effective date of the Contract will be stated on the insurance certificate. Upon the effectiveness of the Contract, the Company shall issue the insurance policy to the applicant immediately.

3. Application Requirements

The applicant must be no younger than 18 years old; have no mental illness; and have the capacity to pay the premium under the Contract.

The applicant may insure himself/herself, his/her family members, and any other affiliated persons (hereinafter referred to as “the Insured”) under this insurance.

Upon the application, the Insured must be no younger than 3 years old and meet the following requirements:

- (1) At the maturity of the insurance period, the Insured shall not be older than 61 years old;
- (2) The Insured must be in good health and have no mental illness;
- (3) The Insured shall not engage in high risk occupation.

4. Cooling-Off Period

From the day following the signing the acknowledgement letter of the Contract, the applicant shall have a 21-day cooling-off period. During this period, if the applicant decides not to procure this insurance, the Contract can be terminated by the applicant’s request.

When terminating the Contract, the applicant shall fill out a request form and provide the Contract with valid certification of identity. The Contract shall be terminated from the time when the

Company receives the request for termination in writing, and the Company shall no longer be bound by the obligations and shall return the total premium paid (without interest) to the applicant, but the applicant shall pay 10 US dollars to the Company for service fees.

5. Sum Insured

The sum insured of the Contract is 1,000 US dollars or the multiple of the premium multiplied by 1,000 US dollars. The applicant and the Company shall determine the sum insured based on the aforementioned methodology. The agreed sum insured shall be stated on the insurance certificate.

6. Premium Payment, Payment Period, and Period of Insurance

The agreed premium under the Contract shall be made by installments.

There are four types of modes of payment, including annual payment, semi-annual payment, quarterly payment, and monthly payment. One of which shall be selected by the applicant as an agreed mode of payment.

There are five types of payment period, including six years, nine years, twelve years, fifteen years, and eighteen years. One of which shall be selected by the applicant as an agreed payment period.

There are five types of period of insurance correlated with the five aforementioned payment period, including nine years, twelve years, fifteen years, eighteen years, and twenty-one years which are stated in the table below:

Table of Payment Period and Corresponding Period of Insurance

Payment Period	6 Years	9 Years	12 Years	15 Years	18 Years
Period of Insurance	9 Years	12 Years	15 Years	18 Years	21 Years

The mode of payment, payment period, and the period of insurance under the Contract shall be stated on the insurance certificate.

7. Premium

The applicant shall pay the premium for this Contract based on the amounts listed in Schedule 1: "Table of Premium for Good Future Insurance" and it shall be stated on the insurance certificate.

After the first initial premium payment made by the applicant, the applicant shall pay the premium for each subsequent period on the agreed date of payment during the payment period under the Contract.

The agreed date of payment shall be the following day of each annual anniversary, each semi-annual anniversary, each quarterly anniversary, or each monthly anniversary of the date of the Contract.

There shall be a 60-days grace period agreed under the Contract starting from the day after the agreed date of payment mentioned above.

Coverage shall remain effective during the grace period. If the applicant fails to pay the premium after the grace period, the Contract shall be suspended from day of the expiration of the grace period, and coverage will not be effective during such suspension.

8. Coverage

Within the period of insurance and the effective period of the Contract, the Company shall assume the following coverages:

(1) Health Benefit

Starting from the 6th anniversary of the Contract, the Insured shall receive the health benefit every 3 anniversary years if the Insured still survives. The amount of health benefit equals 10% of the sum insured for each benefit collection but 100% of the sum insured for the last benefit collection at maturity.

(2) Death Benefit and Total Disability Benefit due to Illness

Starting from 180 days after the effective date of the Contract to the expiry of the Contract, in case the Insured dies or becomes totally disable as stated in the Schedule 2: "Table of Total Disability for Personal Insurance" under this terms and conditions due to illness, the Company shall pay the death benefit or total disability benefit and the Contract shall be terminated. The amount of the death benefit or total disability benefit shall be 100% of the sum insured. (If the Insured dies or becomes totally disable within 180 days starting from the effective date of the Contract, The Company shall return the premium paid to the applicant without interest).

(3) Death Benefit and Total Disability Benefit due to Accidental Injury

- a. In case the Insured dies or becomes totally disabled as stated in the Schedule 2: "Table of Total Disability for Personal Insurance" under this terms and conditions due to an accidental injury within 180 days from the date of such accident, the Company shall pay 300% of the sum insured and Contract shall be terminated.
- b. In case the Insured dies or becomes totally disabled as stated in the Schedule 2: "Table of Total Disability for Personal Insurance" under this terms and conditions due to an accidental injury after 180 days from the date of such accident, the Company shall pay the death benefit or total disability benefit and Contract shall be terminated. The amount of such death benefit or total disability benefit shall be 100% of the sum insured.

9. Exclusion

- (1) Upon the application, if the applicant fails to fulfill the obligation of truthful disclosure as intentionally concealing the bad health conditions or high risky occupation of the Insured, the Company shall not be obliged to pay the insurance benefits stated on Clause 8 under this terms and conditions, but shall be obliged to pay the health benefit;
- (2) If the Insured suffers from any insured event due to any of the following situations, the Company shall not be obliged to pay the insurance benefit stated on Clause 8 under this terms and conditions, but shall be obliged to pay the health benefit:
 - a. The Insured is intentionally murdered or harmed by the applicant;

- b. The Insured is involved in a fight, or is intoxicated from alcohol, or drugs, or is deliberately self-injured;
- c. The Insured is involved in diving, skydiving, climbing, adventure, wrestling competition, extreme stunt show, car racing;
- d. The Insured is speeding, drinking and driving over the legal limit, driving without a valid driver license, or driving a vehicle without a valid registration;
- e. The Insured undergoes prenatal and postnatal examinations, pregnancy (including ectopic pregnancy), miscarriage (including abortion), delivery (including caesarean), contraception, sterilization surgery, infertility treatment and the complications caused by the aforementioned reasons;
- f. The Insured suffers from any medical accident due to plastic surgery or other surgical operation;
- g. The Insured suffers from any insured event due to war, military clash, riot or armed rebellion, nuclear explosions, nuclear radiation or nuclear contamination.

10. Beneficiary

The beneficiary of the insurance benefit provided under the Contract, except for the death benefit, shall be the Insured.

When completing the application procedure, the applicant or the Insured may designate one or more beneficiary/beneficiaries for the death benefit. They can also change the beneficiary/beneficiaries of death benefit during the period of insurance. The beneficiary/beneficiaries stated on the insurance certificate refer(s) to the beneficiary/beneficiaries of death benefit.

If there are multiple beneficiaries of death benefit, the order and proportion of benefit to be received by each beneficiary shall be determined. If such proportion is not determined, the beneficiaries shall have equal entitlement to the benefits.

If the beneficiary of death benefit is under the age of 18 or diagnosed with mental illness, the guardian of the beneficiary shall be designated as the representative of the beneficiary.

If the applicant or the Insured changes the beneficiary of the death benefit during the period of insurance, a written notice shall be provided to the Company. The Company shall endorse the Contract or other insurance documents or attach an endorsement.

In case of any intentional murder or attempted murder of the Insured by the beneficiary, the beneficiary shall lose his/her right to receive the benefit.

After the death of the Insured, if any of the following circumstances occurs, the benefit shall bequest to the Insured in respect of which the Company shall fulfill its payment obligation in accordance with the applicable provisions of laws of the Kingdom of Cambodia:

- (1) No beneficiary has been designated or clearly determined;
- (2) The beneficiary dies before the Insured, and there is no other beneficiary;
- (3) The beneficiary loses the right to receive the benefit or has given up such right in accordance with the laws, and there is no other beneficiary.
- (4) If the beneficiary and the Insured dies from the same accident and the order of death cannot be determined, it shall be considered that the beneficiary has died before the Insured.

11. Notice of Insured Event

The applicant, the Insured, or the beneficiary, upon becoming aware of any insured event, shall promptly notify the Company.

12. Claim and Payment of Benefit

- (1) The beneficiary, as the claimant for benefit, shall fill out the claim application form and provide evidences and documents required for claiming the benefit listed under Clause 13 of the Contract. If the evidences and documents are not complete, the Company shall promptly inform the claimant at once to provide supplementary evidences and documents. The claimant shall be obliged to promptly provide the relevant evidences and documents mentioned above.
- (2) The Company, upon receipt of the claim application form from the claimant and the above-mentioned evidences and documents, shall verify them within 10 working days, or 20 working days for complicated cases.

After verification, if it is confirmed to be covered, the Company shall pay the benefit within 2 working days upon reaching an agreement with the claimant on the payment of the Benefit. After verification, if it is confirmed not to be covered, the Company shall, within 2 working days of the verification, issue a notice of refusal of insurance benefit payment to the claimant by explaining the reasons.

- (3) The effective period for the beneficiary to claim the health benefit from the Company shall be two years, and to claim other benefits of the Contract shall be one year, from the date on which the beneficiary is aware of or should have been aware of the occurrence of the insured event.

13. Evidences and Documents Required for Claiming Insurance Benefit

- (1) An insurance certificate or any other proof of the objective existence of this insurance contract;
- (2) Legal and valid identification documents of the claimant;
- (3) Evidences and documents proving the fact, nature, and cause of the accident available to be provided by the claimant;
- (4) If a representative is appointed to claim the benefit, a power of attorney and identification documents of the representative;
- (5) If claiming for the disability benefit, certificates of degree of disability or letter of authentication of degree of physical disability issued by a medical institution or authentication institution which is legally qualified in disability authentication. If the evidences and documents are medically verified by the Company to be insufficient for determining the final approval, the Company has the right to require the applicant to provide additional supporting documents.

14. Disappearance

If the Insured disappears within the validity of the Contract and is later declared dead by the court, the Company shall pay the death benefit according to the Clause 8, Section (2), and the Contract shall be terminated. The amount of death benefit shall be 100% of the sum insured.

The time of death of the Insured shall be the date of declaration of death by the court.

If the Insured reappears or is confirmed to be alive after the declaration of death, the Company shall have the right to collect the benefit received by the beneficiary. If the Company proves the false declaration of the Insured's death by the beneficiary, the Company shall have the right to collect the benefit received by the beneficiary and to terminate the Contract immediately without paying the cash value of the Contract.

15. Termination by the Applicant

After the Contract is created, unless otherwise provided in the Contract, the applicant may request to terminate the Contract. If the applicant requests to terminate the Contract, he/she shall fill out a request form for termination of contract and submit the Contract and certification of identity of the applicant. The Contract shall be terminated when the Company receives the request form for termination of contract. The Company shall, within five (5) working days from the date of receiving the request for termination, return the cash value of the Contract to the applicant.

If the applicant terminates the Contract after the cooling-off period, he/she shall bear the economic loss arising from such termination.

16. Cash Value

The term "cash value" referred to in the Contract means the surrender payment to be made by the Company to the applicant according to the provisions of the Contract at premature termination of the Contract.

The cash value at the end of each policy year of the Contract shall be stated on the insurance certificate (see Schedule 3: "Table of Cash Value of the Contract at the End of Each Policy Year"). The term of cash value stated under the Contract is calculated according to the aforementioned table.

17. Policy Loan

- (1) During the term of the Contract, the applicant can apply for a loan by using the Contract as collateral after obtaining approval from the Company. The loan amount shall not exceed 70% of the balance of the net cash value after deducting the unpaid amounts. The maximum term of each loan shall not exceed 12 months, and the interest rate shall be set at 6% per annum. If the principal and interest of the loan are not fully repaid when they are due, the outstanding principal and interest of the loan shall become the basis for calculating the compound interest rate for the new term of the loan.

- (2) From the following day of the day when the principal, interest, and other outstanding amount of the loan reach an amount equal to or more than the cash value of the Contract, the Contract shall be suspended, and the Company shall not be obliged to pay the benefit.

18. Contract Suspension and Contract Reinstatement

- (1) The Contract shall be suspended if the applicant fails to pay the premiums on time according to the provisions of the Contract, or there is an occurrence of the condition stated under Clause 17 section (2) of the Contract, and the Company shall not be obliged to pay the benefit.

Within two years after the suspension of the Contract, the applicant may request to reinstate the Contract, and the Contract shall reinstate from the following day of the day on which the applicant formally processes for reinstatement of the Contract and pays the outstanding premium with interest and other outstanding amounts with interest. Interest rate shall be set at 6% per annum.

- (2) Two years after the suspension of the Contract, it will become permanently invalid. The Company shall no longer accept any request to reinstate the Contract. When the applicant formally processes the termination, the Company shall return the cash value at the time of suspension to the applicant. Any delay of the receipts of the aforementioned cash value by the applicant does not subject to any interest.

19. Clear Explanation and Truthful Disclosure

At the creation of the Contract, the Company shall clearly explain to the applicant the contents of the Contract.

For the exclusion clause under the terms and conditions of the insurance and any important matters such as the responsibility of economic loss due to termination by the applicant after the cooling-off period, the Company shall, at the execution of the Contract, provide obvious disclosures to the applicant on the insurance plan, application form, or other insurance documents.

The Company may inquire the applicant about personal information, health condition, previous medical history, family medical history of the applicant and the Insured, and other matters related to the execution of the Contract. The applicant shall, with honesty and legal liability, fulfill the obligation of truthful disclosure otherwise, the Contract shall be invalid.

If the applicant unintentionally fails to fulfill the obligation of truthful disclosure, resulting in inability of the Company to decide whether to cover or by what mean to cover, the Company shall not cover any insurance benefit stated on the Clause 8 under this terms and conditions prior to termination of the Contract, but shall pay the health benefit. If the applicant requests to maintain the effectiveness of the Contract, the Company shall re-underwrite the insurance. After the underwriting approval, the Company shall re-calculate the premium; sign and create a special contract for the agreed terms and conditions. After the applicant pays the additional premium required, the Contract shall be continued, and shall enter effect. If the applicant requests to terminate the Contract because of this, the Company shall return the cash value of the Contract to the applicant.

If the applicant intentionally fails to fulfill the obligation of truthful disclosure or provide fraudulent information, the Company shall not cover any insurance benefit and shall have the right to terminate the Contract unilaterally on the date of confirmation for such fraudulence. If the applicant requests to terminate the Contract, the Company shall not return the premium paid or the cash value of Contract.

20. Contract Modification

The applicant and the Company may negotiate to modify the contents of the Contract. In the case of modification, the applicant shall fill out a request form for modification of the Contract, and the Company, after examining and approving the request, shall endorse the insurance policy or other insurance documents or attach an endorsement, or enter into a written amendment agreement with the applicant.

In case the applicant changes his/her contact address and contact information, he/she shall promptly notify the Company in writing. If the applicant fails to do so, the company shall provide relevant notices through the latest contact address and contact information known.

The applicant shall fill in the true age of the Insured on the application form. In case of any misstatement, he/she shall enter into a written agreement to modify the age with the Company, and the premium shall be re-calculated based on the true age. The premium shall be refunded in case of overpayment and shall be supplemented in case of underpayment. Any calculation related to interest shall be based on 6% per annum.

In case of misstatement of age of the Insured by the applicant, and the true age is not eligible under the provision of the Contract, the Company may terminate the Contract unilaterally and has the following rights:

- (1) Not to return the cash value of the Contract to the applicant if the insurance benefit has been paid;
- (2) To return the total premium paid without interest to the applicant and charge 10 US dollars for service fees if no insurance benefit has been paid.

21. Dispute Resolution

For any dispute relevant to the insurance business, any of the disputing parties shall submit the dispute to the Ministry of Economy and Finance for mediation and resolution prior to filing a lawsuit in a court or commencing arbitration, except in relation to a dispute involving criminal charges.

This Contract is written in Khmer, English, and Chinese, and the Khmer version shall prevail in case of any inconsistency.

22. Definition

The Company: refers to Grand China Life Insurance PLC.

Year of age: refers to age calculated based on the date of birth stated on identification documents, which shall be zero from the date of birth and increase by one when a year has passed; it shall not be counted as one year if the year has not passed.

Legally valid identification document: refers to a certificate or document, such as ID card, passport, etc., issued by the national government to prove the identity.

Accident: refers to objective hazard which is external, unexpected, unintentional, non-disease, and directly causes personal injury. Accident includes explosion, collapse, scalding, collision, lightning strike, electric shock, contortion, frostbite, heat stroke, drowning, suffocation, fall, acute poisoning, animal bite, car or boat or plane crash, work-related injury caused by overwork. Sudden death is not attributable to accidental death (Sudden death refers to non-violent sudden death of a person that appears healthy within 24 hours after occurrence of symptoms due to underlying illness, malfunction, or other causes. Sudden death shall be determined by the hospital diagnosis and authentication by the police station.)

Policy year: from the effective date of the Contract (or yearly anniversary of the effective date) to the anniversary of the effective date in the following year.

Anniversary of the effectiveness: the annual (semi-annually, quarterly, or monthly) anniversary of the effective date of the Contract in each year (half year, quarter, or month).

Drugs: refers to opium, heroine, methamphetamine, morphine, cannabis, cocaine, ketamine and determined by the United Nations and other nationally restricted addictive narcotics and psychiatric drugs, except any medicines which contained components of drugs, but is prescribed by a doctor and used by following the doctor's prescription for the treatment of disease.

Drinking and driving over the legal limit: refers to an event in which the vehicle driver is tested or verified to contain in every hundred milliliter of his/her blood the level of alcohol which reaches or exceeds the level limited by law or the government.

Driving without a valid driver license: refers to any of the following situations:

- (1) not obtaining driving qualifications;
- (2) driving a type of vehicle which does not match the driving license;
- (3) having an unqualified driving license;
- (4) having a learner's license and learning to drive without coach guidance, or without following the designated time and route for learners.

Driving without a valid registration: refers to any of the following situations:

- (1) Any vehicle which has been de-registered in accordance with the law;
- (2) Failing to undergo or to pass regular safety and technical inspection of motor vehicles.

Vehicles: refers to any vehicle transported by a machine on road and on board.

Diving: refers to underwater activity in rivers, lakes, seas, reservoirs, canals and other water areas by using auxiliary breathing apparatus.

Climbing: refers to the activity of climbing cliffs, building facades, man-made cliffs, ice cliffs, and icebergs.

Adventure: refers to the act of deliberately putting oneself in any circumstance by knowing that it causes risks of death or injury under certain natural conditions; for example, river rafting, mountaineering, walking through the desert or in an inaccessible forest.

Extreme stunt show: refers to the performance of equestrian, juggling, animal training and others.

Mental illness, mental and behavioral disorder: is based on the “International Statistical Classification of Diseases and Related Health Problems (ICD-10)” issued by the World Health Organization.

War: refers to the armed struggle between nation’s, groups of people, or political groups for certain political and economic purpose, subject to declaration of the government.

Military conflict: refers to an armed confrontation between nations or people within certain scope and subject to declaration of the government.

Riot: refers to an armed disturbance which undermines social order, subject to declaration of the government.

High risk occupation: mainly refers to forest transporting workers; forest fires protectors; beasts breeders; venomous animal breeders; oceanic fishermen; stone or sand mining workers, workers who work in mines; scuba diver; all offshore oil (diver will be included) workers; fuel trailer driver and occupants; rescue crew; helicopter pilots; steel framework workers; construction scaffolding workers; installers of glass curtain walls; exterior cleaning service for high-rise buildings; tunnel construction workers; bridge construction workers; large dam project workers; digging well workers; explosion workers; liquid and gaseous fuels like natural gas, coal-to-gas manufacturing workers; explosives, pyrotechnics and firecrackers processing workers; strong acids and bases like sulfuric, hydrochloric, nitric, caustic manufacturing workers; toxic product processing workers; ship disassembling workers; war correspondent; advertising signboard installers; high-rise building workers; stuntmen; air acrobatics performers; high-voltage facility installers, repairmen; dangerous, toxic, radiologic wastes disposing workers; unemployed for long period of time; drug enforcement police; riot police; special police; on-the-spot rescuers; special army; air soldiers; feet and submarine soldiers; skiing players; wrestling players.

Applicant: refers to a natural person or a legal entity, who will become an insured, that completes and signs a written application form for insurance.

The Insured: refers to a natural person or a legal entity which purchase the insurance policy, in some cases this person might be both, the policy owner as well as the insured.

Beneficiary: refers to a third party of a life insurance contract that has the legal rights to receive the benefits from the life insurance contract.

Schedule 1, Schedule 2, and Schedule 3

Schedule 2: “Table of Total Disability for Personal Insurance”

Class	Item	Description of Disability
Class 1	1	Permanent and complete loss of vision in both eyes (Note 1)
	2	Loss of two upper limbs or two lower limbs
	3	Loss of one upper limb and one lower limb
	4	Permanent and complete loss of vision in one eye and loss of one upper limb
	5	Permanent and complete loss of vision in one eye and loss of one lower limb
	6	Permanent and complete loss of functions of four limbs (Note 2)
	7	Permanent and complete loss of masticatory and swallowing functions (Note 3)
	8	Central nervous system or chest or abdominal organ dysfunction disorders, [resulting in] inability to engage in any work for the remainder of life and needing support from others for daily activities to sustain life (Note 4)

Note:

(1) Loss of vision includes loss or removal of eyeball, or being unable to distinguish between light and dark, or only able to identify hand movement in front of the eyes; the best corrected visual acuity is lower than 0.02 of the international vision standards, or the visual radius is less than 5 degrees, and having diagnosis certificate issued by an optician accredited by the Company.

(2) Loss of functions of joints means permanent stiffness, or paralysis, or the inability to move freely of joints.

(3) Loss of masticatory and swallowing functions refers to a state of physical disorder or malfunction caused by any reasons other than teeth, resulting in inability to chew or swallow, and inability to eat or swallow any food other than liquid.

(4) Needing support from others for daily activities to sustain life refers to the inability to eat, excrete, wear and take off clothes, live, walk, bath, etc., by oneself and needing the help of others.

Schedule 1: "Table of Premium for Good Future Insurance"

Currency Unit: US Dollars

Age	Payment Period				
	6 Years	9 Years	12 Years	15 Years	18 Years
3	171.96	124.97	99.51	84.39	74.43
4	171.91	124.93	99.48	84.36	74.40
5	171.88	124.90	99.45	84.34	74.39
6	171.86	124.89	99.44	84.33	74.38
7	171.86	124.88	99.44	84.34	74.39
8	171.86	124.88	99.45	84.34	74.40
9	171.86	124.89	99.45	84.35	74.41
10	171.86	124.89	99.46	84.36	74.42
11	171.86	124.90	99.47	84.37	74.43
12	171.87	124.91	99.49	84.39	74.44
13	171.88	124.93	99.50	84.40	74.45
14	171.89	124.95	99.52	84.42	74.47
15	171.92	124.97	99.54	84.44	74.49
16	171.94	124.99	99.56	84.45	74.50
17	171.95	125.00	99.57	84.46	74.51
18	171.96	125.01	99.57	84.47	74.52
19	171.97	125.01	99.57	84.47	74.52
20	171.97	125.01	99.57	84.47	74.52
21	171.96	125.01	99.57	84.47	74.53
22	171.96	125.00	99.57	84.47	74.54
23	171.95	125.00	99.57	84.48	74.55
24	171.95	125.00	99.58	84.49	74.56
25	171.95	125.00	99.58	84.50	74.59
26	171.95	125.01	99.60	84.52	74.61
27	171.96	125.02	99.62	84.55	74.65
28	171.97	125.04	99.64	84.58	74.69
29	171.98	125.06	99.67	84.62	74.73
30	172.00	125.09	99.70	84.66	74.79
31	172.03	125.12	99.75	84.71	74.85
32	172.05	125.16	99.79	84.77	74.92
33	172.08	125.20	99.85	84.84	75.00
34	172.12	125.25	99.91	84.91	75.09
35	172.16	125.31	99.98	85.00	75.19
36	172.21	125.37	100.06	85.09	75.30
37	172.26	125.44	100.14	85.19	75.43
38	172.32	125.52	100.24	85.31	75.56
39	172.39	125.61	100.35	85.44	75.72
40	172.47	125.71	100.47	85.58	-

41	172.55	125.82	100.60	85.74	-
42	172.64	125.94	100.74	85.91	-
43	172.74	126.07	100.90	-	-
44	172.85	126.21	101.08	-	-
45	172.97	126.38	101.28	-	-
46	173.10	126.55	-	-	-
47	173.25	126.75	-	-	-
48	173.42	126.96	-	-	-
49	173.60	-	-	-	-
50	173.79	-	-	-	-
51	174.01	-	-	-	-

Note: Semi-Annual Payment = Annual Payment*0.52

Quarterly Payment = Annual Payment*0.27

Monthly Payment = Annual Payment*0.09

Schedule 3: “Table of Cash Value of the Contract at the End of Each Policy Year”
(Include Health Benefit)

Currency Unit: US Dollars

Cash Value for 6 Years Payment Period									
Age/Policy Year	1	2	3	4	5	6	7	8	9
3	0.00	0.00	422.30	590.16	764.93	946.81	944.57	971.87	1,000.00
4	0.00	0.00	422.41	590.25	764.97	946.81	944.57	971.87	1,000.00
5	0.00	0.00	422.49	590.31	765.00	946.81	944.57	971.87	1,000.00
6	0.00	0.00	422.53	590.33	765.01	946.81	944.57	971.87	1,000.00
7	0.00	0.00	422.54	590.34	765.02	946.81	944.57	971.87	1,000.00
8	0.00	0.00	422.54	590.34	765.02	946.81	944.57	971.87	1,000.00
9	0.00	0.00	422.54	590.35	765.02	946.82	944.57	971.87	1,000.00
10	0.00	0.00	422.55	590.35	765.03	946.82	944.58	971.87	1,000.00
11	0.00	0.00	422.55	590.36	765.03	946.83	944.58	971.87	1,000.00
12	0.00	0.00	422.56	590.37	765.03	946.84	944.58	971.87	1,000.00
13	0.00	0.00	422.58	590.36	765.03	946.84	944.58	971.87	1,000.00
14	0.00	0.00	422.56	590.34	765.01	946.84	944.58	971.87	1,000.00
15	0.00	0.00	422.53	590.31	764.99	946.84	944.58	971.87	1,000.00
16	0.00	0.00	422.49	590.27	764.97	946.84	944.58	971.87	1,000.00
17	0.00	0.00	422.46	590.25	764.96	946.84	944.58	971.87	1,000.00
18	0.00	0.00	422.43	590.23	764.95	946.84	944.58	971.87	1,000.00
19	0.00	0.00	422.42	590.22	764.95	946.84	944.58	971.87	1,000.00
20	0.00	0.00	422.41	590.22	764.95	946.83	944.58	971.87	1,000.00
21	0.00	0.00	422.41	590.22	764.95	946.83	944.58	971.87	1,000.00
22	0.00	0.00	422.42	590.23	764.95	946.84	944.58	971.87	1,000.00
23	0.00	0.00	422.43	590.24	764.96	946.84	944.58	971.87	1,000.00

24	0.00	0.00	422.44	590.25	764.97	946.84	944.58	971.87	1,000.00
25	0.00	0.00	422.45	590.25	764.97	946.85	944.59	971.87	1,000.00
26	0.00	0.00	422.46	590.26	764.97	946.85	944.59	971.87	1,000.00
27	0.00	0.00	422.46	590.26	764.97	946.86	944.59	971.87	1,000.00
28	0.00	0.00	422.47	590.26	764.97	946.87	944.60	971.88	1,000.00
29	0.00	0.00	422.46	590.25	764.97	946.88	944.60	971.88	1,000.00
30	0.00	0.00	422.45	590.24	764.96	946.89	944.61	971.88	1,000.00
31	0.00	0.00	422.44	590.23	764.96	946.90	944.62	971.88	1,000.00
32	0.00	0.00	422.43	590.21	764.95	946.92	944.62	971.88	1,000.00
33	0.00	0.00	422.41	590.19	764.93	946.93	944.63	971.89	1,000.00
34	0.00	0.00	422.38	590.16	764.92	946.95	944.64	971.89	1,000.00
35	0.00	0.00	422.36	590.13	764.90	946.97	944.65	971.89	1,000.00
36	0.00	0.00	422.32	590.09	764.88	946.99	944.66	971.89	1,000.00
37	0.00	0.00	422.29	590.05	764.85	947.02	944.68	971.90	1,000.00
38	0.00	0.00	422.24	590.00	764.83	947.04	944.69	971.90	1,000.00
39	0.00	0.00	422.19	589.95	764.80	947.07	944.71	971.91	1,000.00
40	0.00	0.00	422.14	589.89	764.76	947.10	944.72	971.91	1,000.00
41	0.00	0.00	422.08	589.82	764.73	947.14	944.74	971.92	1,000.00
42	0.00	0.00	422.01	589.75	764.68	947.18	944.76	971.92	1,000.00
43	0.00	0.00	421.94	589.67	764.64	947.22	944.79	971.93	1,000.00
44	0.00	0.00	421.85	589.58	764.59	947.27	944.81	971.94	1,000.00
45	0.00	0.00	421.76	589.48	764.53	947.32	944.84	971.94	1,000.00
46	0.00	0.00	421.66	589.37	764.47	947.38	944.87	971.95	1,000.00
47	0.00	0.00	421.55	589.25	764.40	947.45	944.90	971.96	1,000.00
48	0.00	0.00	421.43	589.11	764.32	947.52	944.94	971.97	1,000.00
49	0.00	0.00	421.29	588.96	764.23	947.59	944.98	971.98	1,000.00
50	0.00	0.00	421.14	588.80	764.14	947.68	945.02	971.99	1,000.00
51	0.00	0.00	420.97	588.62	764.04	947.77	945.07	972.01	1,000.00