## **Custom Proposal**



Employee Name:	
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I understand that the permanent whole life offer made available to me through my employer, ABC Company, for a proposed effective date of xx/xx/xx is available on a Guaranteed Issue basis requiring no medical underwriting. This is a one-time offer. Additionally, if I do enroll during this initial open enrollment I can take advantage of continued Guaranteed Issue in future open enrollments up to \$100k max. If I forgo this initial opportunity I will have to go through underwriting in the future.

I have had a Benefit Counselor review the features and benefits including the dividend options and choose to **enroll** or **waive** (circle one). I understand, if I do enroll, this coverage is portable at the same cost should I leave my employer in the future.

Below are weekly rates as a payroll deduction based upon my age as of the effective date. If enrolling select premium and coverage amount.

If Waiving, I am signing acknowledging I have had an opportunity to consider this offering and am choosing not to at this time.

Signature if Waiving:

Signature if Enrolling:

## \$10k Face Amount

\$x.xx weekly non-smoker

\$x.xx weekly smoker

## \$25k Face Amount

\$x.xx weekly non-smoker

\$x.xx weekly smoker

## \$50k Face Amount

\$x.xx weekly non-smoker

\$x.xx weekly smoker