WELCOME TO PRECOA!

In 2004, Mark Hornibrook and Bret Davis met with a desire to form a preneed company that would eclipse those that already existed in its ability to proactively reach families and help them preplan their final wishes.

Since 2004, Precoa (the Preneed Company of America) has grown to over $100 million in sales, expanding into a nation-wide network of leading funeral homes, including some of the largest and most revered firms in the industry.

Precoa offers a complete preneed solution with comprehensive proactive marketing, innovative insurance product design and the financial strength of policies backed by National Guardian Life Insurance Company.
WELCOME TO NGL!

National Guardian Life Insurance Company (NGL) has consistently been rated one of America’s most successful, independent mutual life insurance companies. They are known for the financial stability and excellent customer service.

FINANCIAL STABILITY

NGL has scored an A.M. Best “A- (Excellent)” rating since 1963 and has enjoyed more than 100 years of financial stability due to a conservative investment philosophy that makes policyholder safety and security the top priority.

NGL boasts a strong and smart surplus ratio of 9%* and will not sacrifice stability for short-term yields. As a result its portfolio is focused on long term success.

NGL’s consolidated assets continue to grow and now exceed $2.5 Billion – an increase of 126% over the last 10 years.


EXCELLENT CUSTOMER SERVICE

NGL strives to exceed service expectations in all areas of its business. When it comes to processing new policies and claims, NGL consistently meets or exceeds its own very high standards. Accuracy and speed are both a priority.
The Portland customer service team will remain as it’s always been. Any questions regarding the following should be directed to the Portland Office:

- The web portal (www.precoa.com)
- The funeral planning center (call center)
- Appointment cancellations / notes
- Marketing support
- Executive office

**Hours of Operation:**
8:00 AM to 5:00 PM, Pacific Standard Time

**Address:**
13221 SW 68th Pkwy, Ste 100
Portland, OR 97223

**Main Line:**
(877) 244-0999

**Client Services:**
(866) 774-0605 or e-mail at fpcsupport@precoa.com

**Main Fax:**
(503) 244-7585

**Website:**
www.Precoa.com
The customer service you’ve received in the past will only be enhanced by the new customer service team in Madison, WI. Any questions regarding the following should be directed to the NGL Office:

- Policies information
- Policy underwriting
- Claims information
- Commission questions

*Between now and the beginning of 2012 any questions regarding past LHLIC policies should continue to be directed to the Phoenix customer service office. Any new policies written with NGL should be directed to NGL. After all of your LHLIC policies are transferred to NGL (beginning of 2012) all customer service questions for old and new policies should be directed to NGL.

**Hours of Operation:**
7:00 AM - 7:00 PM M-Th, 7:00 AM - 5:00 PM F - CST

**Address (Regular Mail):**
PO Box 1191
Madison, WI 53701

**Address (Overnight Mail):**
2 East Gilman St.
Madison, WI 53703

**NGL Main Line:**
(608) 257-5611

**Preneed Policies Main Line:**
(800) 988-0826

**New Business Fax (New Applications):**
(866) 228-9927

**New Business Corrections Fax:**
(608) 443-5368

**Customer Service Fax:**
(608)257-2136
agentsupport@nglic.com

**Claims Fax:**
(866) 228-9450

**Online Claims:**
Login to the web portal at [www.precoa.com](http://www.precoa.com)
DEATH BENEFIT CHANGES

In states where it is allowed, all Single Pays age 91+ and any applicant that answers "Yes" to the TI question on the application will only be offered the Annuity product.

Where the annuity is not available (ME, MT, NH, OR, VT, WA), single pay insurance will take effect.

For both the TI and annuity, there are no charge backs for death.

Commissions are 1 percent for all single pay policies age 86-99 and all TI policies.

PRECOA

Premium Rate Schedule
Standard Precoa Plan

Available Plans by Age
<table>
<thead>
<tr>
<th>Age</th>
<th>Standard</th>
<th>Graded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3Y</td>
<td>0.95</td>
<td>0.95</td>
</tr>
<tr>
<td>5Y</td>
<td>0.95</td>
<td>0.95</td>
</tr>
<tr>
<td>1Y</td>
<td>0.95</td>
<td>0.95</td>
</tr>
<tr>
<td>20Y</td>
<td>0.95</td>
<td>0.95</td>
</tr>
</tbody>
</table>

Benefit Determination

Graded Death Benefit
Quoted "Yes" or "No"

Multi Pay Graded Death Benefits
Year 1: Lesser of 120% premium paid or full benefit
Year 2: Full Benefit

Premium Calculations

Single Premium
Payment Today = $k * Premium
Example: 72-year-old wants $5,000 face amount
Payment Today = 0.05 * $5,000 = $250.00

Multi Pay - 3 Year, 5 Year, 10 Years, and 20 Year
Monthly = $k * Premium / Number of Payments
Example: 72-year-old wants $5,000 face amount for 10 years
Monthly Payment = 0.05 * $5,000 / 12 = $58.33

How much can I afford?

Funeral Amount = Initial Face Amount / (1 - Interest Rate)
Example: 72-year-old wants to pay $7,500 for a funeral
Initial Face Amount = $7,500 / (1 - 0.05) = $8,000

Down Payment - Single and Multi Pay Premium

Face and Payment Amount Information
<table>
<thead>
<tr>
<th>Face Amount</th>
<th>Payment Amount</th>
<th>Payment Today</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>$2,000</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>$3,000</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Example: 72-year-old wants $5,000 funeral with $1,000 down payment and $14,000 over 10 years.
Monthly Payment = $5,000 / 12 = $416.67

Premium Schedule

<table>
<thead>
<tr>
<th>Age</th>
<th>Single Premium</th>
<th>3 Year</th>
<th>5 Year</th>
<th>10 Year</th>
<th>20 Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>85</td>
<td>1.00</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
</tr>
<tr>
<td>90</td>
<td>1.00</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
</tr>
<tr>
<td>91+</td>
<td>1.00</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
<td>0.95</td>
</tr>
</tbody>
</table>

Minimum Initial Face Amount: $25,000
Minimum Initial Face Amount: $50,000

License 
Precoa Life Insurance Company
2370-Precoa 05/11
PRODUCT AVAILABILITY CHANGES

The graded death benefit payment plan availability will be adjusted for those who answer “yes” to one of the health questions (or decline to answer the health questions). There are no changes for the standard issue policies.

<table>
<thead>
<tr>
<th>Current</th>
<th>New</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Pay</td>
<td>All Ages</td>
<td>All Ages</td>
</tr>
<tr>
<td>3 Year Pay</td>
<td>0-95</td>
<td>0-95</td>
</tr>
<tr>
<td>5 Year Pay</td>
<td>0-90</td>
<td>0-90</td>
</tr>
<tr>
<td>10 Year Pay</td>
<td>0-80</td>
<td>0-85</td>
</tr>
<tr>
<td>20 Year Pay</td>
<td>0-75</td>
<td>0-80</td>
</tr>
</tbody>
</table>

**REMEMBER:** These changes ONLY apply to those who are on a Graded death benefit. An insured is placed on a Graded death benefit if they answer "yes" to one of the health questions, or if they don’t answer the health questions.

**Premium Rate Schedule**

**Standard Issue Plan**

<table>
<thead>
<tr>
<th>Age</th>
<th>Single Premium</th>
<th>Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-15</td>
<td>1,200.00</td>
<td>100.00</td>
</tr>
<tr>
<td>16-30</td>
<td>1,700.00</td>
<td>141.67</td>
</tr>
<tr>
<td>31-45</td>
<td>2,200.00</td>
<td>183.33</td>
</tr>
<tr>
<td>46-60</td>
<td>2,700.00</td>
<td>225.00</td>
</tr>
<tr>
<td>61-75</td>
<td>3,200.00</td>
<td>266.67</td>
</tr>
<tr>
<td>76-90</td>
<td>3,700.00</td>
<td>308.33</td>
</tr>
</tbody>
</table>

**Premium Rate Schedule**

**Graded Issue Plan**

<table>
<thead>
<tr>
<th>Age</th>
<th>Single Premium</th>
<th>Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-15</td>
<td>1,200.00</td>
<td>100.00</td>
</tr>
<tr>
<td>16-30</td>
<td>1,700.00</td>
<td>141.67</td>
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<tr>
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<tr>
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</tr>
<tr>
<td>61-75</td>
<td>3,200.00</td>
<td>266.67</td>
</tr>
<tr>
<td>76-90</td>
<td>3,700.00</td>
<td>308.33</td>
</tr>
</tbody>
</table>

**Amount of Payout & Period of Benefit**

- **Single Pay:** Payout is made in a single lump sum at death.
- **3 Year Pay:** Payout is made in 36 equal monthly payments.
- **5 Year Pay:** Payout is made in 60 equal monthly payments.
- **10 Year Pay:** Payout is made in 120 equal monthly payments.
- **20 Year Pay:** Payout is made in 240 equal monthly payments.

**Benefit Determination**

- **Graded Death Benefit:**
  - Maximum benefit is paid if the insured dies within 2 years of policy issue.
- **Terminal Illness Death Benefit:**
  - Paid only if death occurs within 120 days of filing a claim.

**Precoa**

**Need Help? Call 1-800-360-0880**
RATE CALCULATOR CHANGES

We have updated the online and Excel versions of the rate calculator to include the following:

1. Increased ages for modified/graded policies
2. Updated application view to reflect changes to the application

Note: Premium rates are not changing.

The new online web addresses are as follows:

- Standard Rate Calc: www.precoa.com/calc
- Rate Calc with a .25% Bump: www.precoa.com/calc25
- Rate Calc with a .50% Bump: www.precoa.com/calc50
- Rate Calc with a .75% Bump: www.precoa.com/calc75
- Rate Calc with a 1.0% Bump: www.precoa.com/calc100

Click on the link below to download the new Excel version of the rate calculator.

Excel Rate Calc!

NEW RATE CALCULATOR APP

We are also very excited to announce our NEW Rate Calculator iPhone App!

Download instructions will be coming soon!
COMMISSION CHANGES

Your commissions will remain identical. There will be no change to the amount or direct deposit of your commissions. Premiums will also remain the same.

The timing of commission deposits will change slightly with NGL. LHLIC was able to process commissions half a day faster than NGL. This could result in a one day delay in your commissions depending on your bank. The new ability to fax apps should offset this delay (see image below).

NGL uses U.S. Bank whereas LHLIC uses Wells Fargo. If you use U.S. Bank you will be paid commissions faster than other banks.

Timing of Commission Payments

Day 0 = Day of funded appointment

![Diagram showing the timing of commission payments for LHLIC and NGL]

INCREASING ADVANCE RATES

NTOs (not take outs) will be charged back from your future commissions as opposed to your reserve account. An NTO (not taken out) is any policy that cancels before the 30 day free look period is over.

For example, if you sold a policy yesterday and it cancels today (or anytime within the first thirty business days) the chargeback will come directly out of your next sale commission as opposed to coming out of your reserve account.

To offset this change you will be advanced 5% more on all of your sales.

For Example:

If your current reserve rate on an EFT sale is 20% then it will automatically be adjusted to 15%. This will result in a 5% increase in your advance rate.
RESERVE ACCOUNT TRANSITION

The reserve account balance you maintain with Lincoln Heritage Life Insurance Company will transfer over to National Guardian Life at the end of the first month you start writing with NGL.

For example, on July 31st all reserve account balances will transfer from LHLIC to NGL for those counselors who sold their first NGL policy in the month of July.

Any Lincoln Heritage policy charge backs will be taken out of the transferred NGL balance.

POLICY TRANSITION

It is important to note that even though your reserve balance will be transferring to NGL at the end of your first month selling NGL, your previously written LHLIC policies will remain with LHLIC until the beginning of 2012.

At that time a letter will be sent to all of your LHLIC policy holders explaining that NGL will now be administering their policies. These policies will be co-owned by LHLIC and NGL. This means that the policy holders do not need to sign anything.

If they are on Direct Bill they will need to send their checks to Madison, WI. This will be clearly stated in the letter that is sent out early next year.

TIMING OF EFT PAYMENTS

When a policy is submitted on the 25th or later of any month and the selected draw date is the 10th or earlier, the policy effective date will be set to the first of the following month. The first payment will be processed immediately and the next payment will come out the following month.

Example:

A policy is being issued on Aug 25.

The initial payment draw will occur immediately, paying September’s premium.

Policy effective date will be Sep 1.

The draw day chosen is the 3rd of each month.

The first ongoing payment will draw on Oct 3 for October’s premium.
POST DATED CHECKS

*** All post-dated checks will be processed when they are received, regardless of the date on the check.***

FINAL WISHES ORGANIZER CHANGES

The only change to the FWO is the sticker on the back. We have 23,000 FWOs in stock at LHLIC so instead of reprinting we've added a WhyPreplan.org sticker to the back of the FWO over the LHFP logo.
A Fresh New Look

This form is now a *duplicate* opposed to a *triplicate*. The *white* copy should go to the funeral home. The *yellow* copy is for the family.

### YOUR MEMORIAL GUIDE — Part A

#### 1. Vital Statistics
- Full Name
- Birthplace
- Date of Birth
- Ancestry/Race
- Marital Status

#### 2. Military Record
- War
- Serial #
- Date & Place of Induction
- Date & Place of Discharge
- Branch of Service
- Location of Discharge

#### 3. Insurance Information

#### 4. Emergency Contacts
- Local, other than family members

#### 5. Funeral Service Requests
- Name of Funeral Home
- City and State
- Place of Service
- Religious Preference
- Participating Org.

#### 6. Persons to Be in Charge of Final Arrangements
- Full Name
- Address
- City
- State
- Age
- Telephone
- Relationship

#### 7. Special Instructions
- Flower Preference
- Music: Organist
- Soloist
- Music Selections
- Jewelry & Accessories
- Clothing Preference
- Newspaper(s) for Obituary Notice

#### 8. Internment Requests
- Name of Cemetery
- City & State
- Own Cemetery Property
- Burial
- Cremation
- Other

Signed: _________________________

It is my wish that you be spared anxiety, expense and inconvenience at the time of my death. I ask the Funeral Home listed to archive this Memorial Guide document, which includes my detailed funeral arrangements, to be brought forward at my time of death.
MEMORIAL GUIDE PART B CHANGES

A Fresh New Look

This form is now a *duplicate* opposed to a *triplicate*.
The *white* copy should go to the funeral home.
The *yellow* copy is for the family.

YOUR MEMORIAL GUIDE — Part B

<table>
<thead>
<tr>
<th>PERSONS TO BE NOTIFIED (Family - Friends - Neighbors - Coworkers - Church/Lodge Members)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Please offer the free memorial guide documentation service to those listed below.</td>
</tr>
<tr>
<td>Upon your passing, there will be telephone calls to make, errands to run and household</td>
</tr>
<tr>
<td>details to take care of. While we cannot possibly include everyone you hold close to your</td>
</tr>
<tr>
<td>heart, the following list should serve as a quick reference of relatives, friends, neighbors</td>
</tr>
<tr>
<td>or church/lodge members who live in your community and who can be notified upon your</td>
</tr>
<tr>
<td>passing. It should list those nearby special people who can be called upon to help out</td>
</tr>
<tr>
<td>and relay information to out-of-town friends and family.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Full Name</strong></td>
</tr>
<tr>
<td>Relationship: ___________ Phone (__________)</td>
</tr>
<tr>
<td>Address: ___________ City ___________ State _______ Zip _______</td>
</tr>
</tbody>
</table>

3003PN-MGR 06/11

WHITE COPY: Funeral Home  YELLOW COPY: Family
COST ESTIMATE CHANGES

A Fresh New Look

This form is now a *duplicate* opposed to a *triplicate*.
The *white* copy should go to the funeral home.
The *yellow* copy is for the family.

### FUNERAL COST ESTIMATE

<table>
<thead>
<tr>
<th>A</th>
<th>FUNERAL SERVICES</th>
<th>(1)</th>
<th>(2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Use of Facilities/Staff/Equipment for:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Basic Services of Funeral Directors and Staff</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Embalming □ / Refrigeration □</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Other Preparation (cosmetics, casketing, dressing)</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Visitation/viewing</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Funeral/Memorial Services</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Graveside Service</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Cremation Services</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Forwarding/Receiving</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Transportation</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Minor</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Family Cost/Incurrence(s) number</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Utility Vehicle/Van</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Other Services/Utilities/Equipment</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL SERVICES (A)</strong></td>
<td>$_____</td>
<td>$_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B</th>
<th>FUNERIAL MERCHANDISE</th>
<th>(1)</th>
<th>(2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Casket 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Casket 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Outer Burial Container 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Outer Burial Container 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Urn Manufacturer 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Urn Manufacturer 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL MERCHANDISE (B)</strong></td>
<td>$_____</td>
<td>$_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C</th>
<th>CASH ADVANCE ITEMS</th>
<th>(1)</th>
<th>(2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dress/Clothing(s) and Attire</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Ordinary Notice(s)</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Flowers</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$_____</td>
<td>$_____</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL CASH ADVANCE ITEMS (C)</strong></td>
<td>$_____</td>
<td>$_____</td>
</tr>
</tbody>
</table>

**TOTAL GOODS AND SERVICES (A+B) | $ | $ |

**TOTAL FUNERAL AMOUNT (A+B+C) | $ | $ |
APPLICATION CHANGES

The following changes have been made to the application:

- New e-mail address field
- Only 2 health questions (AIDS question only in FL, MA, OH)
- New payment mode box
- Only 1 applicant signature required
- Optional Irrevocable Assignment on App (Exception: FL)
- New Appointment Code field

Replacement questions:
- 2-part questions for KY, MT, TX, OH, OR, UT, WI
- Shorter questions for ID, FL, MN, OK, TN
- No questions for all other states

The back of the application contains the EFT authorization, electronic check disclosure, irrevocable, direction for payment of proceeds, and fraud warning statements. The acknowledgement of payment is to be used as a cash receipt.
CONNECTING YOUR SALES

Timely and accurate sales data will help you to get the most out of Precoa's Web Portal, Daily Rankings, and up-to-date reporting. To help connect your sales as quickly as possible, there is an additional step to complete when an appointment funds.

There are two ways to connect your sales. You must do one of the following for every funded appointment:

1. Each appointment you find on the web portal has a 3 digit APPT CODE. You can write this code in the Producer’s Statement section of the Application in the "Appointment Code" Field (usually the last section).
2. Each NGL application is pre-numbered with an APP ID in the upper right hand corner. Enter the LAST 4 digits of the APP ID into the portal when you complete a funded appointment.

Every funded appointment will require you to either enter the LAST 4 digits of the APP ID, OR check the box verifying that you wrote the APPT CODE on the Application.

APPLICATION PAYMENT MODE

The new payment mode box should be completed as follows:

- **Single Pay** - Check any time the family wants to do a Single Pay. (Mail): Send in the completed check with the application. (Fax): Fax in a voided check with the application.
- **Multi Pay** - Check any time the family wants to do a Multi Pay. (Mail): Send in the completed check with the application. (Fax): Fax in a voided check with the application.
- **The OTHER Payment Options**: Check any time the family wants to do any of the following (the payment authorization form must be completed):
  1. Monthly Credit Card
  2. Monthly EFT from Saving Account
  3. Monthly EFT or Single Pay EFT from Checking Account without a check or for someone other than the policy holder or insured
  4. Direct Bill (monthly, quarterly, semi-annual, annual)

<table>
<thead>
<tr>
<th>Available Plans</th>
<th>Payment Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Pay</td>
<td>Single Pay EFT from Checking</td>
</tr>
<tr>
<td>3 Year Pay</td>
<td>Monthly EFT - Total First Payment ONLY  (include voided check/one-time withdrawal)</td>
</tr>
<tr>
<td>5 Year Pay</td>
<td>Multi Pay EFT from Checking</td>
</tr>
<tr>
<td>10 Year Pay</td>
<td>Monthly EFT - Total First Payment and ongoing</td>
</tr>
<tr>
<td>20 Year Pay</td>
<td>Monthly Payments (include voided check)</td>
</tr>
<tr>
<td>Annuity</td>
<td>Payment Date (1-28th)</td>
</tr>
</tbody>
</table>

Other Payment Options
- Complete Payment Authorization Form
The Payment Authorization Form should only be completed if you are doing one of the following:

- Monthly Credit Card (complete sections 2 & 4)
- Monthly EFT from Saving Account (complete sections 3 & 4)
- Monthly EFT or Single Pay EFT from Checking Account without a check or for someone other than the policy holder or insured. (complete sections 3 & 4)
- Monthly, Quarterly, Semi-Annual, or Annual Direct Bill (complete section 1 only)

1. PAYMENT MODEL (Required - select one)
   - Monthly Credit Card (complete sections 2 & 4)
   - Monthly EFT (complete sections 3 & 4)
   - Single Pay EFT (complete sections 3 & 4)

2. CREDIT CARD INFORMATION
   - Visa
   - MC
   - Card Number
   - Exp Date

3. BANK ACCOUNT INFORMATION
   - Bank Name
   - Checking
   - Savings
   - Routing Number
   - Account Number

4. AUTHORIZATION (Required for Credit Card, Checking or Savings Account)
   - I authorize National Guardian Life Insurance Company to make payments as specified below. By signing below, I certify that I have read the withdrawal authorization disclosures.

   MONTHLY PAYMENT AMOUNT
   - Monthly Payment Amount
   - Payment Date (1st-20th)

   OR
   - Single Payment Amount
   - Account/Credit Card Information (Optional)
   - Account/Credit Card Information (Optional)

5. AUTHORIZATION (Required for Credit Card, Checking or Savings Account)
   - Monthly Credit Card Withdrawal: National Guardian Life Insurance Company (NGL) will debit the premium due through the method(s) indicated for the amount and date specified on the form or as stated in any previous contract or endorsement. This premium will be paid and effective at the contract or endorsement date or the stated due date if earlier. This authorization can be terminated at any time by either party. This authorization is subject to the applicable rate schedule(s) of the policy. Premiums paid in full are non-refundable. The method of payment will not change in the event of any change in the premium due. NGL has the right to revoke this method of payment at any time.
NOTICE OF CANCELLATION

There are no updates to the Notice of Cancellation.
EARLY PAY OFF

Early Payoff Options

90 Days Same As Cash

Simply pay the original single payment amount less any payments that you have made. You get full credit for all payments made. This option must be paid off within 90 days of policy issue.

Call Toll Free 800.988.0826

Anytime Payoff

• No early payoff penalty
• No interest
• No fee
• Payoff anytime YOU want

Simply take the original face amount divided by the original number of payments and multiply times the number of remaining payments. That is your payoff amount. There is no penalty, no fee, and no interest on the payoff amount. Pay it off whenever you want. Available for all payment plans.

Example: A $5,000, 10-year payment plan to be paid off on the 3rd year.

\[
\frac{5000}{120} \times 90 = \text{Early Payoff Amount}
\]

NGL address and phone number have been added

National Guardian Life Insurance Company
Two East Gilman Street
Madison, WI 53703
Call Toll Free: 800.988.0826

SUBMITTING NEW BUSINESS
MAILING NEW BUSINESS

After your state rollout, you will start sending applications to NGL in Madison, Wisconsin. The new business envelope will be included in your App kits.

FAXING NEW BUSINESS

You are going to enjoy greater flexibility and convenience with additional ways to send your applications. Faxed applications get priority focus at NGL.

The application cover page is a brand new form that will be included in your App kits.

The application cover page (ACP) should be used for EVERY application that is faxed in and should include the following:

1. Application Cover Page
2. Application/Enrollment Form (include a voided check and/or payment authorization form)
3. Statement of Goods and Services

Remember the following points when faxing:

* Fax one Application Cover Page, with appropriate paperwork, for each insured. Multiple apps can be sent in a single fax, but each app must have the cover page on top.
* Fax only originals.
* Keep original policy until new policy is issued.
* If a future draw date is needed, hold the application until that date.
* If you need to resend a fax (e.g. paper jam), check YES next to "is this a resubmission" above and resend the entire packet again. DO NOT simply resend the remaining pages.
FUNERAL HOME ACCESS

Funeral Homes can access the 3 new web portal features by doing the following:

1. Go to www.precoa.com
2. Click on the Funeral Home link (upper-right corner)
3. The following options should appear:

   ![Start a Claim](image1)
   ![Order Supplies](image2)
   ![Reports](image3)
COUNSELOR ACCESS

Counselors can access the 3 new web portal features by doing the following:

1. Login to the web portal
2. Click on the resources tab
3. The following options should appear:

![Image of web portal features]

LOG IN

When you click on any one of the 3 new features you will be required to enter in your login information. A blue login box should appear within a pop over window.

![Image of login interface]

1. Enter your Social Security Number, or Tax ID, in the "User ID" box.

2. Your password is the following formula:
(First letter of your last name or business name, capitalized,) +(the last six digits of your SSN/TIN)+(an exclamation point(!))
For Example:
John Brown’s SSN is 123-45-6789. Therefore his password would be: "B456789!".

Your User ID and Password will not become activated until you have been appointed with NGL.

**FINDING A POLICY**

1. To look up a policy, click on Policy Search.

2. Enter in your User ID and Password

3. From this screen you are able to search for existing policies by policy number, name, or app ID.

4. From you search results, click on the specific policy you want to view.

5. The following policy information is available:
*Policy Details - type, status, face amount, issue date, etc.
*Billing Details - billed/paid-to-date, payor, etc.
*Financial Activity - type of action, date, and amount.

6. It's from the policy information page that you can even start a claim.
*See the Claims chapter for more information.

**SUPPLY ORDERING**

1. Click on Order Supplies.

2. Enter in your User ID and Password

3. Select Precoa 1 from the first drown drop down and then choose your state.
4. This is the supply ordering page. Indicate how many of each material you would like and then click "Add to Order" at the bottom of the page.

**App Kit**

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<th>Qty</th>
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**Final Wishes Organizer Kit (Individual)** PRECOA FWOK-OR. Includes Win Their Appreciation Brochure Guaranteed (PRECOA-PNWTAG), Final Wishes Organizer (PRECOA-PNWF), Memorial Guide A&B, (3000PN-MGA and 3000PN-MGB), Funeral Cost Estimate (3000PN-FCE), App. (3000PN-I-OR), Goods & Services (3000G&S), Notice of Cancellation (3000PN-NCC), EPO Card (3000PN-EPO), App. Cover Page (3000PN-ACP), Premium Authorization Form (3000PN-PWA), Business Reply Mail Envelope (ENG-14)

<table>
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<tr>
<th>Qty</th>
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</table>

**Stepping Stones Kit (Individual)** PRECOA SSK-OR. Includes Win Their Appreciation Brochure Guaranteed (PRECOA-PNWTAG), Stepping Stones Folder (PRECOA-PNSSF), Memorial Guide A&B, (3000PN-MGA & 3000PN-MGB), Funeral Cost Estimate (3000PN-FCE), App. (3000PN-I-OR), Goods & Services (3000G&S), Notice of Cancellation (3000PN-NCC), EPO Card (3000PN-EPO), App. Cover Page (3000PN-ACP), Premium Authorization Form (3000PN-PWA), Business Reply Mail Envelope (ENG-14)

<table>
<thead>
<tr>
<th>Qty</th>
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**Application**

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<tr>
<th>Qty</th>
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</table>

**Application (Individual)** 3000PN-I-OR (Rev. 05/11)

**As Needed**

<table>
<thead>
<tr>
<th>Qty</th>
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<tbody>
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</tr>
</tbody>
</table>

**Application Cover Page** 3000PN-ACP (Rev. 06/11)

**Early Payoff Option Card** 3000PN-EPO (Rev. 06/11)

**Final Wishes Organizer** PRECOA-PNWF (Rev. 06/11)

**Funeral Cost Estimate** 3000PN-FCE (Rev. 06/11)

**Goods and Services** 3000G&S (Rev. 06/11)

**Irrevocable Assignment to Funeral Provider** PN-IRASSIGN (Rev. 01/09)

**Memorial Guide Part A** 3000PN-MGA (Rev. 06/11)

**Memorial Guide Part B** 3000PN-MGB (Rev. 05/11)

**Multiple Beneficiary Designation** 2B04PN (Rev. 05/06)

**Notice of Cancellation** 3000PN-NCC (Rev. 06/11)

**Payment Authorization Form** 3000PN-PWA (Rev. 06/11)

**Replacement Form** REFL-MODEL:0000 (Rev. 01/09)

**Return Envelope** ENGL-14 (Rev. 06/11)

**Revolvable Assignment to Funeral Provider** PN-REASSIGN (Rev. 02/09)

**Stepping Stones Folder** PRECOA-PNSSF (Rev. 06/11)

**SUPPLY SHIPPMENT**

4. Verify your supply order. Complete your shipping information and select the shipping details. If you choose rush shipping you will need to provide a credit card, e-check, or pay offline for the balance.

Clicking "Checkout" will complete your order.
Precoa Supply Order

Qty: 50  Item: Final Wishes Organizer Kit (Individual)

Item Number: PRECOA FWOOk-OR

Price: .00

Shipping Price: 0.00

Total Price: $0.00

Order More Supplies Remove

Name:* 

ATTN: 

Address 1:* Please use physical address, if available.

Address 2:

City: *

State: * OR

Zip Code:* 

Address Type:* Commercial Residential?

Comments 

[Reset Address] [Make This Address Permanent]

Your Email: For order confirmation purposes

Phone Number: For delivery notification

* = Required information

Shipping Details

- **Standard Shipping (FREE):** Orders received by 12:00 Central Time will be shipped the next day.
- **2-Day (+$10.00):** Orders received by 1:00 PM Central Time will be shipped same day for receipt in two business days (by 4:30PM for businesses, 7:00PM for residences). 2-Day shipping not available to P.O. Boxes.
- **Standard Overnight (+$20.00):** Orders received by 1:00 PM Central Time will be shipped same day for receipt the next business day by 3:00PM. Overnight shipping not available to P.O. Boxes.
- **First Overnight (+$40.00):** Orders received by 1:00 PM Central Time will be shipped same day for receipt the next business day by 8:30AM. Overnight shipping not available to P.O. Boxes.

Note: Orders are processed Monday-Friday, with the exception of holidays

[Checkout]

[Cancel]
REPORTS

1. Click on Reports.

2. Enter in your User ID and Password

3. The NGL Report Link provides access to your production and aging reports. Commission reports are available by individual or summary statements.

All commission statements will be online. Select a specific date to view your daily payment statement or select summary statement.

NGL Report Link

Click here to access your production reports.

Commission Statements

Payment date: 07/25/2011  Get Payment Statement
Statement date: 07/26/2011  Get Summary Statement

Search Statements for:
A status code: Predefined Search
Exact text (like a name)  Search Statements
REPORT LINK

Clicking on Report Link opens the Business Objects interface. Production reports can be found in the production report folder under public folders. Other reports can be found in the general folder.

CLAIM OPTIONS

Processing a claim is easy. 95% of claims in 2011 have been paid the same day. 99.6% within 48 hours.

There are three options for submitting your claims.

1. **Online** - Simply look up the policy online and start the claim (see lesson 2).
2. **Fax** - Fax the completed claim form to 866.228.9450.
3. **Mail** - Mail the completed claim form to:

    Preneed Service Center  
    P.O. Box 1191  
    Madison, WI 53701-1191

The claim form can be found on the main page of the Funeral Home portal or under the Resource Tab of the counselor web portal.

**After Hours Claims:**

NGL does not have a live person to answer claim calls after hours but a claim may be started anytime online.

CLAIM GUIDELINES

* If the claim is submitted by the original funeral home named on the application, a family signature is not needed.

* If death occurs within the first two years of issue on a standard issue policy, a death certificate is required (this may be faxed in).

* A copy of the death certificate is required in Ohio, Wisconsin, Kentucky, Louisiana, Massachusetts, and Texas.

* All claims will be processed within two business days of receipt of all requirements. If you have any questions regarding your claim, please call Preneed Services at 800.988.0826.
ONLINE ACCESS

1. To get started, click on "policy search" on the home page of the funeral home portal or on the resources tab of the counselor web portal.

Enter in your User ID and Password

1. Enter your Social Security Number, or Tax ID, in the "User ID" box.

2. Your password is the following formula:
(First letter of your last name or business name, capitalized,) +(the last six digits of your SSN/TIN) +(an exclamation point(!))

For Example:
John Brown's SSN is 123-45-6789. Therefore his password would be: "B456789!".

Your User ID and Password will not become activated until you have been appointed with NGL.
FINDING A POLICY

2. Enter either the policy ID in the box provided or search by name and click "Go".

<table>
<thead>
<tr>
<th>Policy Number Search</th>
<th>Name Search</th>
<th>Search by App ID</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Search here for policy information and values.</strong> Please note: processed transactions are posted to Policy Detail the following day.</td>
<td><strong>Policy ID</strong></td>
<td><strong>As of Date (mm/dd/yyyy)</strong> Leave blank for current date</td>
</tr>
</tbody>
</table>

If searching by name, locate the policyholder and select the policy number.

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Company</th>
<th>Issue Date</th>
<th>Policy Status</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>NPA0046286</td>
<td>NGL</td>
<td>07/11/2011</td>
<td>N</td>
<td>Own</td>
</tr>
</tbody>
</table>

STARTING A CLAIM

3. Once you have confirmed that you have the correct policy, click on "Start a claim on this policy" button on the screen.

<table>
<thead>
<tr>
<th>Payor</th>
<th>Bob Johnson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Activity in the last two years</td>
<td></td>
</tr>
<tr>
<td>Activity Date</td>
<td></td>
</tr>
</tbody>
</table>

4. Fill in the Required Information and click "Submit Claim". Please include specific requests in the Additional Information box.

<table>
<thead>
<tr>
<th>Additional Required Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Death (mm/dd/yyyy)</td>
</tr>
<tr>
<td>Immediate Cause of Death:</td>
</tr>
<tr>
<td>Cost of Funeral Provided: $</td>
</tr>
</tbody>
</table>

Once you have submitted your claim please print a copy for your records.

Please note that all claims will be processed within two business days. If you have any questions regarding your claim, please call Preneed Services at 800.988.0826.