GTL | **GUARANTEE TRUST LIFE**

GUARANTEE TRUST LIFE
CANCER, HEART ATTACK & STROKE UNDERWRITING GUIDE

POLICY SPECIFICATIONS

1. For ages 18 to 90, the maximum lump sum benefit amount (applied for and in force) is $50,000 each for Cancer benefit and Heart/Stroke benefit. Child riders provide up to $10,000 in coverage for Cancer and/or Heart Attack and Stroke.

2. An applicant can have more than one Cancer or Heart Attack/Stroke policy/rider in force as long as the combined total for the base plan and any riders do not exceed the maximum benefit amount.

3. Dependents who are 17 years or younger can be added as a dependent to the policy. A dependent is defined as the natural born child of the applicant or dependents who are legally adopted or the applicant is the legal guardian. A dependent child cannot have more coverage than the parent. If the husband and wife apply, a dependent can only be added to one policy, not both. (Coverage ends at age 25.)

4. An annual policy fee (if applicable) is required on each policy.

5. The minimum annual benefit premium which includes the base, riders and annual policy fee (if applicable) must be at least $180.

6. There are three Return of Premium Riders available:

    a. Return of Premium after 20 years for ages 50-65 (15 years for ages 66-70).
    b. Return of Premium upon death (prior to age 86).
    c. Return of Premium upon death

    Refer to the outlines of coverage for details and state availability.

GUIDELINES FOR APPLICATION SUBMISSION

7. The applicant and any dependents must be a U.S. citizen or hold a "green card" (permanent resident of US). We will not consider any applicant that has a temporary visa, work or otherwise. The applicant also must have a valid social security number.

8. The agent must be health licensed and use the state approved application in the state where the applicant has permanent residency.

9. A Power of Attorney (POA) and Guardianship are not acceptable for this product.

10. If the application is over 31 days old when received by the Company, a new, currently dated application will be required.

11. The effective date cannot be more than 90 days from the application date or prior to the application date.

12. The draft date cannot be more than 15 days before or after the effective date.

13. Even though there are no non tobacco/tobacco rates, this question must be answered by the applicant. Tobacco use means cigarettes, cigar, pipe, snuff, chewing tobacco, nicotine delivery systems such as electric cigarettes, nicotine gum or patch.

14. Monthly list bill is available for 4 or more lives. Forms are located on our website in GTLink.

REPLACEMENT GUIDELINES

15. We do not permit replacement of another GTL agent's business. Contact our Agency/Marketing department if you have any questions regarding these types of replacements.

UNDERWRITING REQUIREMENTS

16. See the guide below for the underwriting required based on the benefit applied for and the benefit amount. The Company does reserve the right to do a telephone interview (PHI) for any applicant if needed to determine the person's insurability.

Issue Age	Benefit Applied For	Benefit Amount	Routine Requirement
18-90	Cancer and/or Heart Attack & Stroke	$2,500 - $15,000	None
18-90	Cancer and/or Heart Attack & Stroke	$15,001 - $25,000	RX
18-90	Cancer and/or Heart Attack & Stroke	$25,001 - $50,000	RX, PHI & MD (Medical Data)

17. The applicant is not eligible if any of the medications listed in the Medication List are being taken or have been taken in the last 5 years. This list is not an all inclusive list.

18. The Company reserves the right to obtain or request any underwriting requirement to determine the insurability of the applicant.

REINSTATEMENT GUIDELINE
19. A policy can be considered for reinstatement (subject to a reinstatement application) if not lapsed more than 90 days. If more than 90 days, a new application needs to be submitted.

UNDERWRITING GUIDELINES

An application for the Cancer Policy should not be taken in the following situations:

- Leukemia, Hodgkin's or Non-Hodgkin's disease, lymphoma, malignant melanoma, sarcoma, or any internal cancer; a pre-malignant condition or a condition with malignant potential A pre-leukemic condition is also known as Myelodysplastic Syndrome (MDS). This is a blood related condition where not enough blood cells are produced by the bone marrow.

    - A pre-leukemic condition is also known as Myelodysplastic Syndrome (MDS). This is a blood related condition where not enough blood cells are produced by the bone marrow.

    - A pre-malignant condition or condition with malignant potential examples include Barrett's esophagus, adenomatous polyps, adenomas, dysplasia, Monoclonal Gammopathy of Undetermined Significance (MGUS) or cervical intraepithelial neoplasia.

- Medication prescribed for the treatment of internal cancer or malignant melanoma.

- 2 or more medications for Chronic Obstructive Lung/Pulmonary disease, Chronic Bronchitis or Emphysema. It does not include asthma.

- PSA reading greater than 4.0

- Abnormal mammogram where cancer has not been ruled out.

- Other test results for cancer or symptoms or signs of cancer that need further investigation.

- The applicant has or expects to make an appointment with the doctor for a condition relating to cancer.

The applicant is not eligible for the Heart Attack and Stroke Policy or Heart Attack and Stroke rider in the following situations and with the following medical conditions:

- Heart disease which includes heart attack, myocardial infarction, heart bypass, angioplasty, stent placement, angina, congestive heart failure, coronary artery disease, pacemaker or defibrillator.

- Heart arrhythmia, atrial fibrillation, cardiomyopathy, unrepaired aneurysm.

- Insulin use to treat diabetes

- Blood pressure (treated or untreated) greater than 150 systolic (top number) or 95 diastolic (lower number) within 6 months of the application date. For example, if in the past 6 months the applicant had a blood pressure reading of 151/80 or 135/96, they would not qualify for the plan or rider.

- Stroke or Transient Ischemic Attack (TIA)

- Peripheral or arterial vascular disease or carotid artery disease

- Medication prescribed for the treatment of the medical conditions listed

- Symptoms or signs of heart or cerebrovascular disease or disorder that need further investigation

- Abnormal tests results that need further testing or investigation

- The applicant has or expects to make an appointment with the doctor for a condition relating to heart or cardiovascular system.

Height and Weight Chart

If the applicant's build is less than the minimum or greater than the maximum, the applicant does not qualify for the plan. This chart is for both Male and Female applicants.

Height	Min Weight	Max Weight
4'8"	80	172
4'9"	83	178
4'10"	85	184
4'11"	88	190
5'0"	91	197
5'1"	94	207
5'2"	97	210
5'3"	101	217
5'4"	104	224
5'5"	107	231
5'6"	111	238
5'7"	114	245
5'8"	118	253
5'9"	121	260
5'10"	125	268
5'11"	128	276
6'0"	132	283
6'1"	135	291
6'2"	139	299
6'3"	143	308
6'4"	147	316
6'5"	151	324
6'6"	155	333
6'7"	159	341
6'8"	164	350
6'9"	168	358
6'10"	171	367
6'11"	175	375

If the applicant is taking any of the following medications or had taken a medication within the time period listed in the health questions on the application, the person is not eligible for coverage. Brand names are capitalized and generic names are not. With regard to COPD/COLD, the applicant does not qualify if 2 or more medications or oxygen is used. Please note that this list is not all inclusive and may be changed from time to time as medications are added and removed.

MEDICATION	CONDITION	MEDICATION	CONDITION	MEDICATION	CONDITION
3TC	AIDS	furosemide	Congestive Heart Failure	Otrexup	Cancer
abacavir	HIV	Fuzeon	AIDS, HIV	oxygen	COPD/COLD
abarelix	Cancer	Galantamine	Dementia	Paraplatin	Cancer
Adriamycin	Cancer	Gengraf	Cancer	Platinol	Cancer
AL-721	AIDS, HIV	Gleevec	Cancer	Plavix	Heart Disease
albuterol	COPD/COLD	Gleostine, CCNU	Cancer	Plenaxis	Cancer
Alkeran	Cancer	goserelin	Cancer	Pradaxa	Heart Disease
altretamine	Cancer	Granix	Cancer	Prezista	AIDS, HIV
Amen	Cancer	Herceptin	Cancer	Primacor	Heart Disease
Aptivus	AIDS, HIV	Hexalen	Cancer	Provera	Cancer
Aricept	Dementia	Hivid	AIDS, HIV	Rasuvo	Cancer
atazanavir	HIV	Hydergine	Dementia	Reminyl	Dementia
Atripla	AIDS, HIV	Hydrea	Cancer	Rescriptor	AIDS, HIV
Atrovent	COPD/COLD	hydroxyurea	Cancer	Retrovir	AIDS, HIV
AZT	AIDS, HIV	IDV	AIDS, HIV	Reyataz	HIV
BCG	Bladder Cancer	imatinib	Cancer	Rheumatrex	Cancer
bicalutamide	prostate cancer	Imdur	Heart Disease	ritonavir	AIDS, HIV
Blenoxane	Cancer	indinavir	AIDS, HIV	Rivaroxaban	Heart Disease
bleomycin	Cancer	interferon	AIDS, HIV, Cancer	Rivastigmine	Dementia
busulfan	Cancer	interferon alfa-2a	AIDS, HIV, Cancer	Roferon-A	AIDS, HIV, Cancer
Busulfex	Cancer	Invirase	AIDS, HIV	Rubex	Cancer
Caelyx	AIDS, HIV, Cancer	ipratropium	COPD/COLD	Sandimmune	Cancer
carboplatin	Cancer	Iso-Bid	Heart Disease	saquinavir	AIDS, HIV
Casodex	prostate cancer	Isordil	Heart Disease	Selzentry	HIV
chlorotrianisene	Cancer	isosorbide dinitrate	Heart Disease	Sorbitrate	Heart Disease
cisplatin	Cancer	isosorbide mononitrate	Heart Disease	Spiriva	COPD/COLD
Cognex	Dementia	Isotrate	Heart Disease	stavudine	AIDS, HIV
Clopidogrel	Heart Disease	Isotrate ER	Heart Disease	Stilphostrol	Cancer
Combivent Respimat	COPD/COLD	Kaletra	HIV	streptozocin	Cancer
Combivir	AIDS	lamivudine	AIDS, HIV	Sustiva	AIDS, HIV
Crixivan	AIDS, HIV	Lanoxin	Heart Disease	Tace	Cancer
Curretab	Cancer	Lasix	Congestive Heart Failure	Tacrine	Dementia
cyclophosphamide	Cancer	Leukeran	Cancer	tenofovir	AIDS, HIV
cyclosporine	Cancer	leuprolide	Cancer	Teslac	Cancer
Cycrin	Cancer	levamisole hydrochloride	Cancer	Tespa	Cancer
Cytoxan	Cancer	Lexiva	HIV	testolactone	Cancer
d4T	AIDS, HIV	lomustine	Cancer	THC	Cancer
darunavir	AIDS, HIV	lopinavir	HIV	TheraCyx	Bladder Cancer
ddC	AIDS, HIV	Lupron	Cancer	Thioplex	Cancer
delavirdine	AIDS, HIV	maraviroc	HIV	thiotepa	Cancer
Depo-Provera	Cancer	Marinol	Cancer	Tice BCG	Bladder Cancer
didanosine	AIDS, HIV	medroxyprogesterone acetate	Cancer	TICLID	Heart Disease
diethylstilbestrol (DES)	Cancer	Megace	Cancer	Ticlopidine HCL	Heart Disease
Digitek	Heart Disease	Mellaril	Dementia	tiotropium	COPD/COLD

MEDICATION	CONDITION	MEDICATION	CONDITION	MEDICATION	CONDITION
Digoxin	Heart Disease	megestrol	Cancer	tipranavir	AIDS, HIV
Dilatrate-SR	Heart Disease	melphalan	Cancer		
Donepezil	Dementia	Memantine	Dementia	Toposar	Cancer
doxorubicin	Cancer	methotrexate	Cancer	trastuzumab	Cancer
dronabinol	Cancer	Milrinone	Heart Disease	Trelstar	Cancer
Droxia	Cancer	mitomycin	Cancer	Trexall	Cancer
DuoNeb	COPD/COLD	mitoxantrone	Cancer	triptorelin	Cancer
efavirenz	AIDS, HIV	Mutamycin	Cancer	Trizivir	HIV
Eligard	Cancer	Myleran	Cancer	Truvada	HIV
emtricitabine	HIV	Namenda	Dementia	Valcyte	HIV
Emtriva	AIDS, HIV	Namzaric	Dementia	valganiciclovir	HIV
enfuvirtide	AIDS, HIV	Natrecor	Congestive Heart Failure	VePesid	Cancer
Epivir	AIDS	nelfinavir	AIDS, HIV	Videx, ddI	AIDS, HIV
Ergamisol	Cancer	Neoral	Cancer	Vincasar	Cancer
Ergoloid Mesylates	Dementia	Neosar	Cancer	vincristine	Cancer
Estinyl	Cancer	nesiritide	Congestive Heart Failure	Viracept	AIDS, HIV
ethinyl estradiol	Cancer	Neupogen	Cancer	Viramune	AIDS, HIV
Etopophos	Cancer	nevirapine	Cancer	Viread	AIDS, HIV
etoposide	Cancer	Nitro-Bid	AIDS, HIV	Xarelto	Heart Disease
Euflex	Cancer	Nitro-Dur	Heart Disease	zalcitabine	AIDS, HIV
Eulexin	Cancer	Nitroglycerin	Heart Disease	Zanosar	Cancer
Exelon	Dementia	Nitrolingual	Heart Disease	Zarxio	Cancer
filgrastim	Cancer	Nitroquick	Heart Disease	ZDV	AIDS, HIV
flutamide	Cancer	Nitrostat	Heart Disease	Zerit	AIDS, HIV
Fortovase	AIDS, HIV	Norvir	Heart Disease	Ziagen	HIV
fosamprenavir	HIV	Novantrone	Aids,HIV	zidovudine	AIDS, HIV
foscarnet sodium	AIDS, HIV	Oncovin	Cancer	Zofran	Cancer
Foscavir	AIDS, HIV	ondansetron	Cancer		

NEW BUSINESS PROCEDURES

Ways to Submit an Application

- E-Application-Agent Portal (www.gtlic.com) (Client must complete the voice verification call prior to submission. Call GTL's fully automated verification system 24/7, at the toll-free number (866) 839-5132) or use our Text-to-Sign option—see below.
- E-application/Mobile Phone/Tablet
- By email to: und@gtlic.com
- By fax to: (847) 699-8493
- By mail to: Guarantee Trust Life
      Attn: New Business 1275 Milwaukee Ave.
      Glenview, IL 60025

You may also choose the Text-to-Sign option: Select Text-to-Sign during the application process and enter your client's cell phone number and click the Send Link button.

Your client will receive a text message with a secure link to sign their application. The link will be valid for 30 minutes and must be completed to continue the application. Your client will sign inside the window and then tap submit. A second signature can be added by checking the bottom box. **(NOTE: Please make sure your client writes their signature as legibly as possible. Dots and lines will NOT be accepted. To get a larger area to sign, hold the phone horizontally.)**

Your client will receive a thank you message and can then close the window. You will receive a message on the Agent Portal that the signature was captured and can continue with completing the application.

Avoid Delivery Requirements

- Be sure that the client initials any and all changes made on the paper application.
- Be sure to submit bank draft information and a signed PAC form.
- Be sure to include any special signed state required forms.

Please be sure that we have your current email address. You can update your email address by contacting our Sales Support Department at (800) 323-6907 or by email at agency@gtlic.com.

Submitting an Application with a Future Effective Date

Submit the application in same manner as listed under "Ways to Submit an Application."
- Complete all underwriting questions-where applicable.
- Include PAC authorization form if paying by bank draft.
- Note that initial payment will not draft until the effective date of the policy.
- The effective date cannot be 93 days greater than the application date.

NEED QUICK UPDATES ON YOUR PENDING BUSINESS?

- Please remember that GTLink is available 24/7.
- Can't access GTLink? Contact our Sales Support Department for assistance at (800) 323-6907.

**If you have any questions on an active policy please contact
Customer Service Support at 800-338-7452.**

For Underwriting Support please contact 800-635-1993 or email und@gtlic.com.

AGENT PORTAL
VERIFICATION CALL INFORMATION

GTL designed the Agent Portal around you, our valued Agent, in order to provide an efficient and dependable means of submitting e-Signature applications. When it's time to verify the sale, your applicant(s) will find the process simple and reliable. They can complete the verification call either before or after you enter the online e-Signature application. **Keep in mind, however, that GTL will not begin underwriting the e-Signature application until the verification call has been completed.**

> **Please advise your applicant(s) to call the toll-free number (866) 839-5132 to complete the verification call.** For their convenience, GTL's fully-automated verification system is available 24 hours a day and 7 days a week. The call takes approximately 3 minutes to complete.

APPLICANT INFORMATION VERIFIED DURING THE CALL

1. Full name
2. Last 4 digits of social security number
3. Date of birth
4. Second applicant's name (if applicable)
5. Name of GTL product being applied for and if there any additional products
6. Agent of Record's name
7. Verbal response acknowledging they understood the questions on the application and answered them truthfully.
8. Verbal response acknowledging they understand that, if their application for insurance coverage is approved, regular premium payments are required to maintain coverage.
9. For certain products, an additional authorization for GTL to obtain the applicant's medical and prescription history information.

FAQ'S

Why do applicants have to complete a verification call?
The verification call is a necessary step in our e-Signature application process. It gives GTL the authority to perform the necessary underwriting, creates a recorded validation of the applicant's knowledge of applying for coverage, affirms their understanding of the type of coverage applied for and the necessity of periodic premium payments to retain their coverage.

How long does the average verification call take to complete?
3 minutes.

Guarantee Trust Life Insurance Company
1275 Milwaukee Ave. Glenview, IL 60025 | (847) 699-0600

What number do applicants call to complete the verification call?
The toll-free phone number is (866) 839-5132.

Is the call toll-free?
Yes.

What hours is the verification system available?
GTL's automated verification system is available 24/7.

Who has to complete the verification call?
Any adult applicant(s) listed on the application for coverage. If a spouse applies for coverage on the same application, one verification call may be completed to confirm both applicants' information. Children applying for coverage via a child policy or child rider do not need to complete a verification call.

Do children need to complete the verification call?
No. Children applying for coverage via a child policy or child rider do not need to complete a verification call.

Does the applicant have to complete a separate verification call for each product applied for?
No. If the applicant(s) is applying for more than one GTL product at the same time, only one verification call need be completed. The applicant may verbally state all product names/types being applied for.

What if my applicant refuses to complete the verification call?
Please complete and submit a paper application.

Who do I call if my applicant has a problem completing the verification call?
Contact the GTL Sales Support Department at (800) 323-6907 during normal business hours. (Monday through Thursday 7AM to 5PM or Friday 8AM to 12PM Central Time)

Can I submit the e-Signature application before my applicants complete the verification call?
Yes. Keep in mind, however, that GTL will not begin underwriting the e-Signature application until the verification call has been completed and the e-application has been received.

For additional information regarding the sales verification call process, please contact
the GTL Sales Support Department at 1-800-323-6907 during normal business hours.
Monday through Thursday 7AM to 5PM
Friday 8AM to 12PM Central Time

THANK YOU FOR YOUR BUSINESS!