## The Savings Bank Life Insurance Company of Massachusetts

## ACKNOWLEDGMENT OF LIFE INSURANCE POLICY SALES ILLUSTRATION

## **Applicant Statement:**

whi	<u> </u>	nermore, I understand tha	n given to me for the policy for at I will receive an illustration, of such policy delivery.	
Signature of the Applicant/Owner		Date	Date	
Print Name of Applicant/Owner			Print Name of Proposed Insured, if different than Applicant/Owner	
Age	ent Statement:			
I ce	rtify that:			
or	A life insurance sales illustration, which conforms to the life insurance policy applied for, has <b>not</b> been used in the presentation and explanation of this policy.			
	A sales illustration was displayed on a <b>computer screen</b> in the presentation and explanation of this policy based on the criteria below. A printed copy of this illustration will be delivered to the applicant no later than the time the application is submitted for underwriting.			
	Plan: Rid	Initi	al Death Benefit: \$	
Age: Underwriting		ing or Rating Class:		
	Number of Years Illustrated:_		nual/Semi-Annual/Qtrly/Monthly)	
Signature of Agent		Date		
Agent Name and Agent Number		Agency ]	Name and Address	

Copy to Applicant/owner Copy to Home Office Copy for Agent