



**This is only a sample policy. It is not
a promise to issue coverage.**

You **cannot buy** this policy **directly** from
Transamerica.

It is **sold only via licensed agencies** such as Choice Mutual.

To apply, call Choice Mutual
(licensed to sell from Transamerica products)

at 1-800-644-2926.

SEPARATOR PAGE

528201M032
JOINT CASE #: 0000000

SHIRLEY GERLACH

INDEX PAGE – BEGIN

MO: 02
ADMIN SYSTEM: 97.01
OPERATOR ID: U165
POLICY #: 528201M032
ISSUE DATE: 07/01/2013
INSURED: SHIRLEY GERLACH
AGE: 66
SEX: FEMALE
RATE CLASS INDICATOR: Q
RATE CLASS DESC: PREFERRED TOBACCO
OWNER: SHIRLEY GERLACH
STATE: IA
COMPANY #: 07
COMPANY NAME: TRANSAMERICA LIFE INSURANCE COMPANY
PMT METHOD: PAC
PMT MODE: MONTHLY
DEATH BENEFIT OPTION:
COMPLIANCE TEST:

COVERAGES

WL08
ADR10
CR13
CR13
R05401

PLANS

TD12DL
TD5AD8
TD540C
TD540C
TD5ABM

MET FORMS

WL081 WL082 WL083 WL084 ADR10 CR13 R5401T GANIA PRVNTSTD BGNAIC12

INDEX PAGE - END

HOME OFFICE ACCOUNT
0000029902

TRANSAMERICA LIFE INSURANCE COMPANY
4333 EDGEWOOD ROAD NE
CEDAR RAPIDS, IOWA 52499-0001
319-398-8511

FOR MORE INFORMATION ABOUT THIS POLICY PLEASE CONTACT:
09/05/13
POLICY NUMBER
52-8201M03-2

STATEMENT OF POLICY COST AND BENEFIT INFORMATION
PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 66 ISSUE BASIS: PREFERRED TOBACCO
CLASSIFICATION: FEMALE

BASIC POLICY WHOLE LIFE TO AGE 121

POL YR	ANNUAL PREMIUM	MONTHLY PREMIUM	GUAR AMT PAYABLE ON DEATH	GUARANTEED SURRENDER TOTAL	CASH VALUE INCR
01	2043.00	173.60	30,000	0	0
02	2043.00	173.60	30,000	12	12
03	2043.00	173.60	30,000	926	914
04	2043.00	173.60	30,000	1,842	916
05	2043.00	173.60	30,000	2,758	916
06	2043.00	173.60	30,000	3,669	911
07	2043.00	173.60	30,000	4,574	905
08	2043.00	173.60	30,000	5,471	897
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20	2043.00	173.60	30,000	15,222	3,655
55	2043.00	173.60	30,000	30,000	14,778

(MATURITY)

LOAN INTEREST RATE IS DETERMINED WHEN A LOAN IS APPLIED

	SURRENDER COST INDEX	NET PAYMENT INDEX
YEAR 10	49.808	68.099
YEAR 20	53.485	68.099

THE COST INDEXES WERE DESIGNED TO MEASURE THE RELATIVE COST OF LIFE INSURANCE PROTECTION AND MAY BE USEFUL FOR COMPARISON OF SIMILAR POLICIES OFFERED BY OTHER COMPANIES. COST INDEX COMPARISONS SHOULD ONLY BE MADE BETWEEN SIMILAR PLANS OF LIFE INSURANCE AND ONLY COMPARE INDEX NUMBERS FOR THE KIND OF POLICY, FOR YOUR AGE AND FOR THE AMOUNT YOU INTEND TO BUY. SIMILAR PLANS ARE THOSE WHICH PROVIDE ESSENTIALLY THE SAME BASIC BENEFITS AND REQUIRE PREMIUM PAYMENTS FOR APPROXIMATELY THE SAME PERIOD OF TIME. WHEN USING COST INDEXES, A SMALL INDEX NUMBER IS GENERALLY A BETTER BUY THAN A COMPARABLE POLICY WITH A LARGER INDEX NUMBER. THE INDEX DOES NOT TAKE INTO ACCOUNT AMONG OTHER THINGS: (1) THE VALUE OF THE SERVICES OF AN AGENT OR COMPANY; (2) THE RELATIVE STRENGTH AND REPUTATION OF THE COMPANY; AND (3) SMALL DIFFERENCES IN POLICY PROVISIONS.

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PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 66 ISSUE BASIS:
CLASSIFICATION: FEMALE

RIDER	ADB RIDER			
POL YR	ANNUAL PREMIUM		MONTHLY PREMIUM	GUAR AMT PAYABLE ON DEATH
01-05	127.20		10.80	30,000
10	127.20		10.80	30,000
14	127.20		10.80	30,000
(EXPIRY)				
			NET PAYMENT INDEX	
YEAR 10			4.239	

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STATEMENT OF POLICY COST AND BENEFIT INFORMATION (CONTINUED)

PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 10 ISSUE BASIS:
CLASSIFICATION: FEMALE

RIDER		CHILD GRANDCHILD RIDER		
POL YR	ANNUAL PREMIUM		MONTHLY PREMIUM	GUAR AMT PAYABLE ON DEATH
01-05	10.00		.85	5,000
10	10.00		.85	5,000
15	10.00		.85	5,000
(EXPIRY)				
			NET PAYMENT INDEX	
YEAR 10			1.999	

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52-8201M03-2

STATEMENT OF POLICY COST AND BENEFIT INFORMATION (CONTINUED)

PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 14 ISSUE BASIS:
CLASSIFICATION: MALE

RIDER	CHILD GRANDCHILD RIDER		
POL YR	ANNUAL PREMIUM	MONTHLY PREMIUM	GUAR AMT PAYABLE ON DEATH
01-05	10.00	.85	5,000
10	10.00	.85	5,000
11	10.00	.85	5,000

(EXPIRY)

NET PAYMENT INDEX

YEAR 10

1.999

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STATEMENT OF POLICY COST AND BENEFIT INFORMATION (CONTINUED)

PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 66 ISSUE BASIS:
CLASSIFICATION: FEMALE

RIDER	ABR RIDER	
POL YR	ANNUAL PREMIUM	MONTHLY PREMIUM
01-05	.00	.00
10	.00	.00
15	.00	.00
20	.00	.00
30	.00	.00
40	.00	.00
50	.00	.00
55	.00	.00

(EXPIRY)

	NET PAYMENT INDEX
YEAR 10	0.000
YEAR 20	0.000

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POLICY DATA

POLICY NUMBER: 528201M032
POLICY DATE: JULY 01, 2013
FACE AMOUNT: \$ 30,000.00
INSURED: SHIRLEY GERLACH
OWNER: SHIRLEY GERLACH

DATE OF ISSUE: SEPTEMBER 04, 2013
MATURITY DATE: JULY 01, 2068
ISSUE AGE/SEX: 66 /FEMALE

CLASS OF RISK: PREFERRED TOBACCO

TYPE OF COVERAGE	FACE AMOUNT	PREMIUMS PAYABLE	*ANNUAL PREMIUM
BASIC POLICY	\$ 30,000.00	55 YEARS	\$ 2,043.00
ACCIDENTAL DEATH BENEFIT RIDER	30,000.00	TO AGE 80	\$127.20
CHILDREN'S AND GRANDCHILDREN'S BENEFIT RIDER	5,000.00 PER CHILD	TO CHILD'S AGE 25	\$20.00 TOTAL
NUMBER OF COVERED CHILDREN = 2			

***Total Annual Premium on Policy Date** \$ 2,190.20

*THE "ANNUAL PREMIUM" AND "TOTAL ANNUAL PREMIUM ON POLICY DATE" LISTED ON THIS PAGE ARE THE AMOUNT YOU WILL PAY PER YEAR ONLY IF YOU CHOOSE THE ANNUAL PREMIUM PAYMENT MODE. THE AMOUNT YOU PAY PER YEAR MAY BE HIGHER IF YOU PAY PURSUANT TO ANY OTHER PAYMENT MODE. THE "ANNUAL PREMIUM" AND "TOTAL ANNUAL PREMIUM ON POLICY DATE" INCLUDE AN ANNUAL POLICY FEE OF \$ 42.00 . THE POLICY FEE MAY BE HIGHER IF YOU PAY PURSUANT TO ANY PAYMENT MODE OTHER THAN ANNUAL.

Initial Premium Payment Amount and Mode..... \$186.10 MONTHLY PAC
Total Payments Per Year..... \$2,233.20

SCHEDULE OF PREMIUMS

	Annually	Semi-Annually	Quarterly	Monthly
Premium Due Per Payment	\$ 2,190.20	\$ 1,116.60	\$ 568.90	\$ 186.10
Total Payments Per Year	\$ 2,190.20	\$ 2,233.20	\$ 2,275.60	\$ 2,233.20

The Schedule of Premiums above is for direct billing only. A Schedule of Premiums for other payment modes will be provided on request.

TABLE OF POLICY VALUES

IF ALL THE PREMIUMS DUE HAVE BEEN PAID TO THE POLICY ANNIVERSARY AND THERE IS NO LOAN BALANCE OUTSTANDING, THE POLICY VALUES WILL BE:

POLICY NUMBER: 528201M032
NONFORFEITURE INTEREST RATE: 4.50%

END OF POLICY YEAR	AGE OF INSURED	CASH VALUE	EXTENDED TERM INSURANCE		REDUCED PAID UP INSURANCE
			YEARS	DAYS	
1	67	\$ 0.00	0	0	\$ 0.00
2	68	12.00	0	6	21.00
3	69	925.80	1	37	1,601.00
4	70	1,842.30	2	4	3,112.00
5	71	2,757.90	2	279	4,553.00
6	72	3,669.30	3	145	5,925.00
7	73	4,574.40	3	340	7,229.00
8	74	5,471.40	4	140	8,468.00
9	75	6,361.80	4	279	9,647.00
10	76	7,247.10	5	24	10,774.00
11	77	8,126.70	5	104	11,849.00
12	78	9,000.00	5	161	12,879.00
13	79	9,867.00	5	200	13,863.00
14	80	10,728.00	5	228	14,805.00
15	81	11,567.10	5	245	15,689.00
16	82	12,365.10	5	251	16,507.00
17	83	13,125.00	5	246	17,259.00
18	84	13,851.00	5	234	17,956.00
19	85	14,544.30	5	223	18,607.00
20	86	15,222.30	5	220	19,226.00

DELIVERY CERTIFICATE

POLICY/CERTIFICATE: 528201M032

INSURED: SHIRLEY GERLACH

My policy/certificate has been delivered to me and the benefits have been fully explained. I understand this policy/certificate represents an important part of my financial security.

DATE

OWNER'S SIGNATURE: SHIRLEY GERLACH

SALES REPRESENTATIVE

IMPORTANT NOTICE: Delivery Deadline - SEPTEMBER 25, 2013

PLEASE RETURN THIS SIGNED FORM TO: TRANSAMERICA LIFE INSURANCE COMPANY
4333 EDGEWOOD ROAD NE, CEDAR RAPIDS, IOWA 52499
(One signed copy is to remain with the client)

DELIVERY INFORMATION

This policy/certificate has been approved, placed in force, and has been set up on a Monthly check-o-matic basis.

The premium received with the application will be applied to pay the July premium. Each premium due hereafter will be drafted on the 1st through the check-o-matic for \$ 186.10 .

Run Date: 09/05/13
Run Time: 05:32:19

D O C U M E N T - V03 R02 L01
M E R G E S E T E R R O R S

Merge Set ID Tag: 528201M032
Merge Set Number: 17
Grouping Name: AGENT.LIICA.NB
Merge Def: 4635
Print Def: 4635
Printer ERRDDN: See message DMGMRG398I
Page Number: 1

DMGMRG250C DMGRFMT determined the following Missing Forms:
DMGMRG252I Form: 528201M032CPNT 00000
DMGMRG252I Form: 528201M032BNNR 00000

DMGMRG398I Printer ERRDDN: LIICANE

SAMPLE
FROM CHOICE MUTUAL

SEPARATOR PAGE CLIENT LOOSE SECTION

528201M032
JOINT CASE #: 0000000

SHIRLEY GERLACH

MO: 02
ADMIN SYSTEM: 97.01
OPERATOR ID: U165
POLICY #: 528201M032
ISSUE DATE: 07/01/2013
INSURED: SHIRLEY GERLACH
AGE: 66
SEX: FEMALE
RATE CLASS INDICATOR: Q
RATE CLASS DESC: PREFERRED TOBACCO
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DEATH BENEFIT OPTION:
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TD5AD8
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NOTICE OF PRIVACY POLICY

Information Only – No Response Necessary

Protecting your privacy is very important to us. We want you to understand what information we collect and how we use it. We collect and use nonpublic personal information in order to provide our customers with a broad range of financial products and services. We treat your information with the utmost respect and in accordance with our Privacy Policy.

What Information We Collect and From Whom We Collect It

We may collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, our affiliates, or others; and
- Information we receive from non-affiliated third parties, including consumer reporting agencies and insurance support organizations.

Nonpublic personal information is nonpublic information about you that we obtain in connection with providing a financial product or service to you. In some states, personal information may also include your name, address and medical record information but not privileged information. This information may be collected in person, by mail, fax, or by other electronic means as permitted by law or as expressly authorized by you.

What Information We Disclose and to Whom We Disclose It

Depending upon the product or service offered, we may disclose nonpublic personal information we collect to:

- Persons or companies that perform services on our behalf.
- Other financial institutions with which we have joint marketing agreements as permitted by law. In Vermont this includes only your name, contact information, policy coverage and information about your transactions with us or our affiliates.
- A medical professional for the purpose of disclosing a medical problem of which you may not be aware.
- Other insurance support organizations for use in connection with an insurance transaction or to prevent fraud.
- An insurance regulatory authority.
- A law enforcement or other government authority to prevent or prosecute fraud or other unlawful activities.
- Organizations conducting actuarial research studies.
- If applicable, a group policyholder for reporting claims experience or conducting an audit. We do not disclose any nonpublic personal information about you to either our affiliates or non-affiliates, except as permitted by law. Our affiliates are companies with which we share common ownership. They offer life and health insurance and pension and savings products.

Nonpublic personal information about you that we obtain from a report prepared by an insurance support organization may be retained by that organization and disclosed to other persons.

Your Right to Verify Accuracy of Information We Collect

Keeping your information accurate and up to date is very important to us. In some states, you may have the right to write to us in order to request that you have reasonable access to your nonpublic personal information (this includes a record of any subsequent disclosures of medical record information). You may not access information relating to or in anticipation of a claim or a criminal or civil proceeding. If you believe the information we collected about you is inaccurate, you may request that we amend, correct or delete it. We will notify you of our decision, give you our reasons and the opportunity to file a concise statement of dispute with us if you do not agree. Your statement will be made a part of our file and sent to persons or organizations that received your information in the past and in the future as required by law.

Our Security Procedures

We restrict access to the nonpublic personal information and only allow disclosures to persons and companies as permitted or required by law to assist in providing products or services to you. We maintain physical, electronic, and procedural safeguards to protect your nonpublic personal information. Should your relationship with us end, we will maintain and only disclose your nonpublic personal information in accordance with this Privacy Policy.

This Notice applies to the following companies and any separate accounts established for the products they may offer.

Transamerica Series Trust
Transamerica Financial Life Insurance Company (for New York Residents)
Transamerica Advisors Life Insurance Company
Transamerica Advisors Life Insurance Company of New York
Monumental Life Insurance Company
Stonebridge Life Insurance Company
Transamerica Capital, Inc.
Transamerica Life Insurance Company
Western Reserve Life Assurance Co. of Ohio

TRANSAMERICA LIFE INSURANCE COMPANY
4333 EDGEWOOD ROAD NE
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319-398-8511

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CLASSIFICATION: FEMALE

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AGE BASIS: 66 ISSUE BASIS:
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10	127.20				10.80	30,000
14	127.20				10.80	30,000

(EXPIRY)

NET PAYMENT
INDEX

4.239

YEAR 10

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CLASSIFICATION: FEMALE

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10	10.00		.85	5,000
15	10.00		.85	5,000
(EXPIRY)				
			NET PAYMENT INDEX	
YEAR 10			1.999	

THE COST INDEXES WERE DESIGNED TO MEASURE THE RELATIVE COST OF LIFE INSURANCE PROTECTION AND MAY BE USEFUL FOR COMPARISON OF SIMILAR POLICIES OFFERED BY OTHER COMPANIES. COST INDEX COMPARISONS SHOULD ONLY BE MADE BETWEEN SIMILAR PLANS OF LIFE INSURANCE AND ONLY COMPARE INDEX NUMBERS FOR THE KIND OF POLICY, FOR YOUR AGE AND FOR THE AMOUNT YOU INTEND TO BUY. SIMILAR PLANS ARE THOSE WHICH PROVIDE ESSENTIALLY THE SAME BASIC BENEFITS AND REQUIRE PREMIUM PAYMENTS FOR APPROXIMATELY THE SAME PERIOD OF TIME. WHEN USING COST INDEXES, A SMALL INDEX NUMBER IS GENERALLY A BETTER BUY THAN A COMPARABLE POLICY WITH A LARGER INDEX NUMBER. THE INDEX DOES NOT TAKE INTO ACCOUNT AMONG OTHER THINGS: (1) THE VALUE OF THE SERVICES OF AN AGENT OR COMPANY; (2) THE RELATIVE STRENGTH AND REPUTATION OF THE COMPANY; AND (3) SMALL DIFFERENCES IN POLICY PROVISIONS.

TRANSAMERICA LIFE INSURANCE COMPANY
4333 EDGEWOOD ROAD NE
CEDAR RAPIDS, IOWA 52499-0001
319-398-8511

FOR MORE INFORMATION ABOUT THIS POLICY PLEASE CONTACT:
09/05/13
POLICY NUMBER
52-8201M03-2

STATEMENT OF POLICY COST AND BENEFIT INFORMATION (CONTINUED)

PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 14 ISSUE BASIS:
CLASSIFICATION: MALE

RIDER		CHILD GRANDCHILD RIDER		
POL YR	ANNUAL PREMIUM		MONTHLY PREMIUM	GUAR AMT PAYABLE ON DEATH
01-05	10.00		.85	5,000
10	10.00		.85	5,000
11	10.00		.85	5,000
(EXPIRY)				
			NET PAYMENT INDEX	
YEAR 10			1.999	

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4333 EDGEWOOD ROAD NE
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319-398-8511

FOR MORE INFORMATION ABOUT THIS POLICY PLEASE CONTACT:
09/05/13
POLICY NUMBER
52-8201M03-2

STATEMENT OF POLICY COST AND BENEFIT INFORMATION (CONTINUED)

PREPARED FOR: SHIRLEY GERLACH
AGE BASIS: 66 ISSUE BASIS:
CLASSIFICATION: FEMALE

RIDER	ABR RIDER	
POL YR	ANNUAL PREMIUM	MONTHLY PREMIUM
01-05	.00	.00
10	.00	.00
15	.00	.00
20	.00	.00
30	.00	.00
40	.00	.00
50	.00	.00
55	.00	.00

(EXPIRY)

	NET PAYMENT INDEX
YEAR 10	0.000
YEAR 20	0.000

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**NOTICE OF PROTECTION PROVIDED BY
IOWA LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION**

This notice provides a brief summary of the Iowa Life and Health Insurance Guaranty Association (the "Association") and the protection it provides for policyholders. This safety net was created under Iowa law, which determines who and what is covered and the amounts of coverage.

The Association was established to provide protection in the unlikely event that your life, annuity or health insurance company becomes financially unable to meet its obligations and is taken over by its Insurance Department. If this should happen, the Association will typically arrange to continue coverage and pay claims, in accordance with Iowa law, with funding from assessments paid by other insurance companies.

The basic protections provided by the Association are:

Life Insurance

- \$300,000 in death benefits
- \$100,000 in cash surrender and withdrawal values

Health Insurance

- \$500,000 in basic hospital, medical-surgical or major medical insurance benefits
- \$300,000 in disability income protection insurance benefits
- \$300,000 in long-term care insurance benefits
- \$100,000 in other types of health insurance benefits

Annuities

- \$250,000 in annuity benefits, cash surrender and withdrawal values

The maximum amount of protection for each individual, regardless of the number of policies or contracts, is \$350,000. Special rules may apply with regard to hospital, medical-surgical and major medical insurance benefits.

Note: Certain policies and contracts may not be covered or fully covered. If coverage is available, it will be subject to substantial limitations and exclusions. For example, coverage does not extend to any portion(s) of a policy or contract that the insurer does not guarantee, such as certain investment additions to the account value of a variable life insurance policy or a variable annuity contract. There are also various residency requirements under Iowa law.

To learn more about the Association and the protections it provides, as well as those relating to group contracts or retirement plans, please visit the Association's website at www.ialifega.org, or contact:

Iowa Life and Health Insurance
Guaranty Association
700 Walnut Street, Suite 1600
Des Moines, IA 50309
(515) 248-5712

Iowa Insurance Division
330 Maple Street
Des Moines, IA 50319
(515) 281-5705

Information about the financial condition of insurers is available from a variety of sources, including financial rating agencies such as AM Best Company, Fitch Inc., Moody's Investors Service, Inc., and Standard & Poor's. That information may be accessed from the "Helpful Links & Information" page located on the website of the Iowa Insurance Division at www.iid.state.ia.us.

The Association is subject to supervision and regulation by the Commissioner of the Iowa Insurance Division. Persons who desire to file a complaint to allege a violation of the laws governing the Association may contact the Iowa Insurance Division. State law provides that any suit against the Association shall be brought in the Iowa District Court in Polk County, Iowa.

Insurance companies and agents are not allowed by Iowa law to use the existence of the Association or its coverage to encourage you to purchase any form of insurance. When selecting an insurance company, you should not rely on Association coverage. If there is any inconsistency between this notice and Iowa law, then Iowa law will control.

Life Insurance Buyer's Guide

This guide can help you when you shop for life insurance. It discusses how to:

- Find a Policy That Meets Your Needs and Fits Your Budget
- Decide How Much Insurance You Need
- Make Informed Decisions When You Buy a Policy

Prepared by the National Association of Insurance Commissioners

The National Association of Insurance Commissioners is an association of state insurance regulatory officials. This association helps the various insurance departments to coordinate insurance laws for the benefit of all consumers.

This guide does not endorse any company or policy.

Reprinted by Transamerica Life Insurance Company

Important Things to Consider

1. Review your own insurance needs and circumstances. Choose the kind of policy that has benefits that most closely fit your needs. Ask an agent or company to help you.
2. Be sure that you can handle premium payments. Can you afford the initial premium? If the premium increases later and you still need insurance, can you still afford it?
3. Don't sign an insurance application until you review it carefully to be sure all the answers are complete and accurate.
4. Don't buy life insurance unless you intend to stick with your plan. It may be very costly if you quit during the early years of the policy.
5. Don't drop one policy and buy another without a thorough study of the new policy and the one you have now. Replacing your insurance may be costly.
6. Read your policy carefully. Ask your agent or company about anything that is not clear to you.
7. Review your life insurance program with your agent or company every few years to keep up with changes in your income and your needs.

Buying Life Insurance

When you buy life insurance, you want coverage that fits your needs.

First, decide how much you need — and for how long — and what you can afford to pay. Keep in mind the major reason you buy life insurance is to cover the financial effects of unexpected or untimely death. Life insurance can also be one of many ways you plan for the future.

Next, learn what kinds of policies will meet your needs and pick the one that best suits you.

Then, choose the combination of policy premium and benefits that emphasizes protection in case of early death, or benefits in case of long life, or a combination of both.

It makes good sense to ask a life insurance agent or company to help you. An agent can help you review your insurance needs and give you information about the available policies. If one kind of policy doesn't seem to fit your needs, ask about others.

This guide provides only basic information. You can get more facts from a life insurance agent or company or from your public library.

What About the Policy You Have Now?

If you are thinking about dropping a life insurance policy, here are some things you should consider:

- If you decide to replace your policy, don't cancel your old policy until you have received the new one. You then have a minimum period to review your new policy and decide if it is what you wanted.
- It may be costly to replace a policy. Much of what you paid in the early years of the policy you have now, paid for the company's cost of selling and issuing the policy. You may pay this type of cost again if you buy a new policy.
- Ask your tax advisor if dropping your policy could affect your income taxes.
- If you are older or your health has changed, premiums for the new policy will often be higher. You will not be able to buy a new policy if you are not insurable.
- You may have valuable rights and benefits in the policy you now have that are not in the new one.
- If the policy you have now no longer meets your needs, you may not have to replace it. You might be able to change your policy or add to it to get the coverage or benefits you now want.
- At least in the beginning, a policy may pay no benefits for some causes of death covered in the policy you have now.

In all cases, if you are thinking of buying a new policy, check with the agent or company that issued you the one you have now. When you bought your old policy, you may have seen an

illustration of the benefits of your policy. Before replacing your policy, ask your agent or company for an updated illustration. Check to see how the policy has performed and what you might expect in the future, based on the amounts the company is paying now.

How Much Do You Need?

Here are some questions to ask yourself:

- How much of the family income do I provide? If I were to die early, how would my survivors, especially my children, get by? Does anyone else depend on me financially, such as a parent, grandparent, brother or sister?
- Do I have children for whom I'd like to set aside money to finish their education in the event of my death?
- How will my family pay final expenses and repay debts after my death?
- Do I have family members or organizations to whom I would like to leave money?
- Will there be estate taxes to pay after my death?
- How will inflation affect future needs?

As you figure out what you have to meet these needs, count the life insurance you have now, including any group insurance where you work or veteran's insurance. Don't forget Social Security and pension plan survivor's benefits. Add other assets you have: savings, investments, real estate and personal property. Which assets would your family sell or cash in to pay expenses after your death?

What Is the Right Kind of Life Insurance?

All policies are not the same. Some give coverage for your lifetime and others cover you for a specific number of years. Some build up cash values and others do not. Some policies combine different kinds of insurance, and others let you change from one kind of insurance to another. Some policies may offer other benefits while you are still living. Your choice should be based on your needs and what you can afford.

There are two basic types of life insurance: **term insurance** and **cash value insurance**. Term insurance generally has lower premiums in the early years, but does not build up cash values that you can use in the future. You may combine cash value life insurance with term insurance for the period of your greatest need for life insurance to replace income.

Term Insurance covers you for a term of one or more years. It pays a death benefit only if you die in that term. Term insurance generally offers the largest insurance protection for your premium dollar. It generally does not build up cash value.

You can renew most term insurance policies for one or more terms even if your health has changed. Each time you renew the policy for a new term, premiums may be higher. Ask what the premiums will be if you continue to renew the policy. Also ask if you will lose the right to renew the policy at some age. For a higher premium, some companies will give you the right to keep the policy in force

for a guaranteed period at the same price each year. At the end of that time you may need to pass a physical examination to continue coverage, and premiums may increase.

You may be able to trade many term insurance policies for a cash value policy during a conversion period — even if you are not in good health. Premiums for the new policy will be higher than you have been paying for the term insurance.

Cash Value Life Insurance is a type of insurance where the premiums charged are higher at the beginning than they would be for the same amount of term insurance. The part of the premium that is not used for the cost of insurance is invested by the company and builds up a cash value that may be used in a variety of ways. You may borrow against a policy's cash value by taking a policy loan. If you don't pay back the loan and the interest on it, the amount you owe will be subtracted from the benefits when you die, or from the cash value if you stop paying premiums and take out the remaining cash value. You can also use your cash value to keep insurance protection for a limited time or to buy a reduced amount without having to pay more premiums. You also can use the cash value to increase your income in retirement or to help pay for needs such as a child's tuition without canceling the policy. However, to build up this cash value, you must pay higher premiums in the earlier years of the policy. Cash value life insurance may be one of several types; whole life, universal life and variable life are all types of cash value insurance.

Whole Life Insurance covers you for as long as you live if your premiums are paid. You generally pay the same amount in premiums for as long as you live. When you first take out the policy, premiums can be several times higher than you would pay initially for the same amount of term insurance. But they are smaller than the premiums you would eventually pay if you were to keep renewing a term policy until your later years.

Some whole life policies let you pay premiums for a shorter period such as 20 years, or until age 65. Premiums for these policies are higher since the premium payments are made during a shorter period.

Universal Life Insurance is a kind of flexible policy that lets you vary your premium payments. You can also adjust the face amount of your coverage. Increases may require proof that you qualify for the new death benefit. The premiums you pay (less expense charges) go into a policy account that earns interest. Charges are deducted from the account. If your yearly premium payment plus the interest your account earns is less than the charges, your account value will become lower. If it keeps dropping, eventually your coverage will end. To prevent that, you may need to start making premium payments, or increase your premium payments, or lower your death benefits. Even if there is enough in your account to pay the premiums, continuing to pay premiums yourself means that you build up more cash value.

Variable Life Insurance is a kind of insurance where the death benefits and cash values depend on the investment performance of one or more separate accounts, which may be invested in mutual funds or other investments allowed under the policy. Be sure to get the prospectus from the company when buying this kind of policy and STUDY IT CAREFULLY. You will have higher death benefits and cash value if the underlying investments do well. Your benefits and cash value will be lower or may disappear if the investments you chose didn't do as well as you expected. You may pay an extra premium for a guaranteed death benefit.

Life Insurance Illustrations

You may be thinking of buying a policy where cash values, death benefits, dividends or premiums may vary based on events or situations the company does not guarantee (such as interest rates). If

so, you may get an illustration from the agent or company that helps explain how the policy works. The illustration will show how the benefits that are not guaranteed will change as interest rates and other factors change. The illustration will show you what the company guarantees. It will also show you what could happen in the future. Remember that nobody knows what will happen in the future. You should be ready to adjust your financial plans if the cash value doesn't increase as quickly as shown in the illustration. You will be asked to sign a statement that says you understand that some of the numbers in the illustration are not guaranteed.

Finding a Good Value in Life Insurance

After you have decided which kind of life insurance is best for you, compare similar policies from different companies to find which one is likely to give you the best value for your money. A simple comparison of the premiums is not enough. There are other things to consider. For example:

- Do premiums or benefits vary from year to year?
- How much do the benefits build up in the policy?
- What part of the premiums or benefits is not guaranteed?
- What is the effect of interest on money paid and received at different times on the policy?

Remember that no one company offers the lowest cost at all ages for all kinds and amounts of insurance. You should also consider other factors:

- How quickly does the cash value grow? Some policies have low cash values in the early years that build quickly later on. Other policies have a more level cash value build-up. A year-by-year display of values and benefits can be very helpful. (The agent or company will give you a policy summary or an illustration that will show benefits and premiums for selected years.)
- Are there special policy features that particularly suit your needs?
- How are nonguaranteed values calculated? For example, interest rates are important in determining policy returns. In some companies increases reflect the average interest earnings on all of that company's policies regardless of when issued. In others, the return for policies issued in a recent year, or a group of years, reflects the interest earnings on that group of policies; in this case, amounts paid are likely to change more rapidly when interest rates change.

SEPARATOR PAGE AGENT LOOSE SECTION

528201M032
JOINT CASE #: 0000000

SHIRLEY GERLACH

MO: 02
ADMIN SYSTEM: 97.01
OPERATOR ID: U165
POLICY #: 528201M032
ISSUE DATE: 07/01/2013
INSURED: SHIRLEY GERLACH
AGE: 66
SEX: FEMALE
RATE CLASS INDICATOR: Q
RATE CLASS DESC: PREFERRED TOBACCO
OWNER: SHIRLEY GERLACH
STATE: IA
COMPANY #: 07
COMPANY NAME: TRANSAMERICA LIFE INSURANCE COMPANY
PMT METHOD: PAC
PMT MODE: MONTHLY
DEATH BENEFIT OPTION:
COMPLIANCE TEST:

COVERAGES

WL08
ADR10
CR13
CR13
R05401

PLANS

TD12DL
TD5AD8
TD540C
TD540C
TD5ABM

MET FORMS

WL081 WL082 WL083 WL084 ADR10 CR13 R5401T GANIA PRVNTSTD BGNAIC12

HOME OFFICE ACCOUNT
0000029902

528201M032

HOME OFFICE ACCOUNT
PO BOX 1447
CEDAR RAPIDS IA 52499

DELIVERY CERTIFICATE

POLICY/CERTIFICATE: 528201M032

INSURED: SHIRLEY GERLACH

My policy/certificate has been delivered to me and the benefits have been fully explained. I understand this policy/certificate represents an important part of my financial security.

DATE

OWNER'S SIGNATURE: SHIRLEY GERLACH

SALES REPRESENTATIVE

IMPORTANT NOTICE: Delivery Deadline - SEPTEMBER 25, 2013

PLEASE RETURN THIS SIGNED FORM TO: TRANSAMERICA LIFE INSURANCE COMPANY
4333 EDGEWOOD ROAD NE, CEDAR RAPIDS, IOWA 52499
(One signed copy is to remain with the client)

DELIVERY INFORMATION

This policy/certificate has been approved, placed in force, and has been set up on a Monthly check-o-matic basis.

The premium received with the application will be applied to pay the July premium. Each premium due hereafter will be drafted on the 1st through the check-o-matic for \$ 186.10 .

Run Date: 09/05/13
Run Time: 05:32:19

D O C U M E N T - V03 R02 L01
M E R G E S E T E R R O R S

Merge Set ID Tag: 528201M032
Merge Set Number: 17
Grouping Name: INSURED.LIICA.NB
Merge Def: 4635
Print Def: 4635
Printer ERRDDN: See message DMGMRG398I
Page Number: 1

DMGMRG250C DMGRFMT determined the following Missing Forms:
DMGMRG252I Form: 528201M032CPNT 00000
DMGMRG252I Form: 528201M032BNNR 00000

DMGMRG398I Printer ERRDDN: LIICANE

SAMPLE
FROM CHOICE MUTUAL

SEPARATOR PAGE CLIENT BOUND SECTION

528201M032
JOINT CASE #: 0000000

SHIRLEY GERLACH

MO: 02
ADMIN SYSTEM: 97.01
OPERATOR ID: U165
POLICY #: 528201M032
ISSUE DATE: 07/01/2013
INSURED: SHIRLEY GERLACH
AGE: 66
SEX: FEMALE
RATE CLASS INDICATOR: Q
RATE CLASS DESC: PREFERRED TOBACCO
OWNER: SHIRLEY GERLACH
STATE: IA
COMPANY #: 07
COMPANY NAME: TRANSAMERICA LIFE INSURANCE COMPANY
PMT METHOD: PAC
PMT MODE: MONTHLY
DEATH BENEFIT OPTION:
COMPLIANCE TEST:

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CR13
CR13
R05401

PLANS

TD12DL
TD5AD8
TD540C
TD540C
TD5ABM

MET FORMS

WL081 WL082 WL083 WL084 ADR10 CR13 R5401T GANIA PRVNTSTD BGNAIC12

HOME OFFICE ACCOUNT
0000029902



Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA
Administrative Office:
4333 Edgewood Rd NE
Cedar Rapids, IA 52499
(800) 238-4302

(Referred to as the Company, we, our or us)

INSURED SHIRLEY GERLACH
FACE AMOUNT \$ 30,000.00
OWNER SHIRLEY GERLACH

POLICY NUMBER 528201M032
POLICY DATE JULY 01, 2013

We will pay the death benefit to the Beneficiary if the Insured dies while this policy is In Force. All payments are subject to the provisions of this policy.

Signed for the Company at Cedar Rapids, Iowa, on the Date of Issue.

SECRETARY

PRESIDENT

10 DAY RIGHT TO CANCEL - You may cancel this policy by delivering or mailing a Written Request to us or the agent from whom it was purchased. You must return the policy to us or the agent before midnight of the 10th day after you receive it. Your Written Request given by mail and return of the policy by mail are effective on being postmarked, properly addressed and postage paid. We must return all payments made for this policy within 30 days after we receive notice of cancellation and the returned policy.

If you are terminating or borrowing from another life insurance policy owned by you in connection with your purchase of this policy, then this policy may be considered a replacement policy. If this policy is a replacement policy, your right to cancel is extended to midnight of the 30th day after the day you receive it.

This policy is a legal contract between the owner and the Company.

READ YOUR POLICY CAREFULLY

Whole Life Insurance with
Death Benefit Payable at Death While the Policy is In Force
Premiums Payable for a Stated Period Shown in the Policy Data
Non-Participating - No Dividends

GUIDE TO POLICY PROVISIONS

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Change of Beneficiary.....	5
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Extra Benefit Riders.....	8
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Loan Interest Rate.....	7
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POLICY DATA

POLICY NUMBER: 528201M032
POLICY DATE: JULY 01, 2013
FACE AMOUNT: \$ 30,000.00
INSURED: SHIRLEY GERLACH
OWNER: SHIRLEY GERLACH

DATE OF ISSUE: SEPTEMBER 04, 2013
MATURITY DATE: JULY 01, 2068
ISSUE AGE/SEX: 66 /FEMALE

CLASS OF RISK: PREFERRED TOBACCO

TYPE OF COVERAGE	FACE AMOUNT	PREMIUMS PAYABLE	*ANNUAL PREMIUM
BASIC POLICY	\$ 30,000.00	55 YEARS	\$ 2,043.00
ACCIDENTAL DEATH BENEFIT RIDER	30,000.00	TO AGE 80	\$127.20
CHILDREN'S AND GRANDCHILDREN'S BENEFIT RIDER	5,000.00 PER CHILD	TO CHILD'S AGE 25	\$20.00 TOTAL
NUMBER OF COVERED CHILDREN = 2			

***Total Annual Premium on Policy Date** \$ 2,190.20

*THE "ANNUAL PREMIUM" AND "TOTAL ANNUAL PREMIUM ON POLICY DATE" LISTED ON THIS PAGE ARE THE AMOUNT YOU WILL PAY PER YEAR ONLY IF YOU CHOOSE THE ANNUAL PREMIUM PAYMENT MODE. THE AMOUNT YOU PAY PER YEAR MAY BE HIGHER IF YOU PAY PURSUANT TO ANY OTHER PAYMENT MODE. THE "ANNUAL PREMIUM" AND "TOTAL ANNUAL PREMIUM ON POLICY DATE" INCLUDE AN ANNUAL POLICY FEE OF \$ 42.00 . THE POLICY FEE MAY BE HIGHER IF YOU PAY PURSUANT TO ANY PAYMENT MODE OTHER THAN ANNUAL.

Initial Premium Payment Amount and Mode..... \$186.10 MONTHLY PAC
Total Payments Per Year..... \$2,233.20

SCHEDULE OF PREMIUMS

	Annually	Semi-Annually	Quarterly	Monthly
Premium Due Per Payment	\$ 2,190.20	\$ 1,116.60	\$ 568.90	\$ 186.10
Total Payments Per Year	\$ 2,190.20	\$ 2,233.20	\$ 2,275.60	\$ 2,233.20

The Schedule of Premiums above is for direct billing only. A Schedule of Premiums for other payment modes will be provided on request.

TABLE OF POLICY VALUES

IF ALL THE PREMIUMS DUE HAVE BEEN PAID TO THE POLICY ANNIVERSARY AND THERE IS NO LOAN BALANCE OUTSTANDING, THE POLICY VALUES WILL BE:

POLICY NUMBER: 528201M032
NONFORFEITURE INTEREST RATE: 4.50%

END OF POLICY YEAR	AGE OF INSURED	CASH VALUE	EXTENDED TERM INSURANCE		REDUCED PAID UP INSURANCE
			YEARS	DAYS	
1	67	\$ 0.00	0	0	\$ 0.00
2	68	12.00	0	6	21.00
3	69	925.80	1	37	1,601.00
4	70	1,842.30	2	4	3,112.00
5	71	2,757.90	2	279	4,553.00
6	72	3,669.30	3	145	5,925.00
7	73	4,574.40	3	340	7,229.00
8	74	5,471.40	4	140	8,468.00
9	75	6,361.80	4	279	9,647.00
10	76	7,247.10	5	24	10,774.00
11	77	8,126.70	5	104	11,849.00
12	78	9,000.00	5	161	12,879.00
13	79	9,867.00	5	200	13,863.00
14	80	10,728.00	5	228	14,805.00
15	81	11,567.10	5	245	15,689.00
16	82	12,365.10	5	251	16,507.00
17	83	13,125.00	5	246	17,259.00
18	84	13,851.00	5	234	17,956.00
19	85	14,544.30	5	223	18,607.00
20	86	15,222.30	5	220	19,226.00

DEFINITIONS

In this policy:

Age means a person's age in years on his or her last birthday, unless otherwise specified. For purposes of this policy, the Insured's Age changes on each Policy Anniversary.

The **Beneficiary** is the person(s) designated to receive the death benefit on the death of the Insured. The Beneficiary named on the application may be changed as provided in this policy.

The **Date of Issue** is the date this policy is prepared in our office. The Date of Issue is shown in the Policy Data. The Date of Issue may or may not be the same as the Policy Date.

The **Face Amount** is the amount upon which the death benefit is determined. The Face Amount is shown in the Policy Data.

In Force means insurance coverage is in effect and has not terminated.

The **Insured** is the person whose life is insured under this policy. The Insured is identified in the Policy Data.

Lapse means termination of the policy at the end of the grace period due to non-payment of premiums. If this policy Lapses, the Insured's life will no longer be insured under the terms of this policy except as set forth in the Nonforfeiture Provisions.

Loan Balance means the sum of any unpaid policy loans and accrued loan interest. We will deduct any Loan Balance from any amounts payable by us under this policy.

The **Monthly Anniversary Date** is the day of each month coinciding with the Policy Date. If there is no day in a calendar month that coincides with the Policy Date, the Monthly Anniversary Date for that month will be the first day of the following month.

A **Policy Anniversary** is the same day and month as the Policy Date for each year this policy remains In Force.

The **Policy Date** is the date coverage is effective under this policy. We will use the Policy Date to determine the premium due dates, Monthly Anniversary Dates, Policy Anniversaries and Policy Years. The Policy Date is shown in the Policy Data.

A **Policy Year** is the 12 month period directly preceding a Policy Anniversary.

Reinstate means to restore coverage after the policy has Lapsed, in accordance with the Reinstatement provision.

A **Rider** is an attachment to this policy that provides an additional benefit.

Written Request means a signed request in a form satisfactory to us that is received at our Administrative Office.

You and your means the owner of this policy. The owner as of the Date of Issue is identified in the Policy Data. Ownership may be transferred as provided in this policy. Following a transfer of ownership, **you and your** will refer to the new owner.

OWNERSHIP

Owner of the Policy - The owner may exercise all rights under this policy during the Insured's lifetime, including the right to transfer ownership subject to applicable law and regulation. If the owner dies during the Insured's lifetime, ownership of this policy will pass to the owner's estate if no contingent owner is named. You may change the owner by filing a Written Request with us. We will not be bound by any change of ownership until we record it in our records. Unless otherwise specified by you, the change will then take effect as of the date the change is signed by you, subject to any payments made or actions taken by us prior to our recording of the change.

Assignment of the Policy - You may assign this policy by filing a Written Request with us. We will not be bound by any assignment until we record it in our records. Unless otherwise specified by you, the assignment will then take effect as of the date the assignment is signed by you, subject to any payments made or actions taken by us prior to our recording of the assignment. We assume no responsibility for the validity or effect of any assignment of this policy or of any interest in it. Any death benefit which becomes payable to an assignee will be payable in a single sum and will be subject to proof of the assignee's interest and the extent of the assignment.

THE BENEFICIARY

Who Receives the Death Benefit - When the death benefit is payable under this policy, we will pay it to the Beneficiary named by you in accordance with this policy. If no Beneficiary has been designated, or if the interest of all designated Beneficiaries has ended before we make payment of the death benefit, we will pay the death benefit to you. If you are not living at the time, we will pay the death benefit to the executor or administrator of your estate.

Unless you specify otherwise, the following will apply:

1. If any Beneficiary dies before the Insured, that Beneficiary's interest in the death benefit will end.
2. If any Beneficiary dies at the same time as the Insured, or within 30 days after the Insured, that Beneficiary's interest in the death benefit will end if no benefits have been paid to that Beneficiary.
3. If the Beneficiary is a partnership, we will pay the death benefit to the partnership as it existed when the Insured died.

How to Change a Beneficiary - You may name or change the Beneficiary while the Insured is living by sending us a Written Request. The change will not be effective until we record it in our records. Even if the Insured is not living when we record the change, the change will take effect as of the date it was signed. However, any benefits we pay before we record the change will not be subject to the change.

A Beneficiary designated irrevocably may not be changed without the written consent of that Beneficiary.

PAYMENT OF THE DEATH BENEFIT

Proof of Death - We will pay any benefit payable because of death when we receive due proof that the Insured's death occurred while this policy was In Force. The proof must be sent to us at our Administrative Office. We will send appropriate forms to the Beneficiary upon request. Any of our agents will help the Beneficiary fill out the forms without charge.

Death Benefit - The amount of the death benefit will be equal to:

- (a) the Face Amount of this policy,
- plus (b) the amount payable under any attached rider, subject to its terms,
- plus (c) the amount of any portion of a paid premium which applies to a period beyond the Insured's date of death,

minus (d) the amount of any portion of a premium due under the Grace Period provision,

minus (e) the amount of any Loan Balance.

The amount of the death benefit may be affected by the Misstatement of Age or Sex in the Application provision of this policy.

PREMIUMS

Premium - To keep this policy In Force, each premium must be paid in advance. Premiums should be sent to our Administrative Office or as otherwise instructed by us. We will give you a receipt if you ask for one. The first premium is due on the Policy Date. Subsequent premiums are payable while the Insured is living and within the grace period. If a part of the premium ceases to be payable under the provisions of a rider, the premium will be reduced accordingly. The mode of premium payment may be changed on any Policy Anniversary to any other mode shown in the Policy Data.

The annual premium is shown in the Policy Data. If you pay your premiums more frequently than annually, the total amount you pay in a year may be higher than if you made one annual payment.

Grace Period - If premiums are not paid when they are due, this policy will Lapse. We will allow a period of 31 days after the premium due date for payment of each premium after the first premium. This means that if a premium is not paid on or before the date it is due, you may pay that premium during the 31 day period immediately following the due date. The Insured's life will continue to be insured during this 31 day period. During the grace period, we will not charge any interest on the premium due. You will have the entire grace period within which to remit payment. Any payments sent by U.S. mail must be postmarked within the grace period. If the Insured dies during the grace period before the premium is paid, we will deduct the portion of the premium required to provide insurance from the premium due date to the date of the Insured's death from the death benefits payable under this policy.

Reinstatement - If this policy Lapses, you may Reinstatement it as provided in this section unless it has been surrendered for its Net Cash Value. Any Reinstatement must be made during the lifetime of the Insured and within five years from the end of the grace period. Before we Reinstatement your policy, we will require:

1. Your Written Request to Reinstatement this policy,
2. The Insured's written consent to Reinstatement,
3. Evidence of insurability satisfactory to us,
4. Payment of all overdue premiums with interest from the due date of each premium. The interest rate is 6% per annum, compounded annually, and
5. Payment or reinstatement of any Loan Balance at the interest rates in effect during the period of Lapse.

The date of Reinstatement will be the Monthly Anniversary Date on or following the date the application for Reinstatement is approved by us, so long as the Insured is still living.

NONFORFEITURE PROVISIONS

Cash Value - The Cash Value while this policy is In Force on a premium paying basis is shown in the Table of Policy Values. Cash Values have been calculated on the assumption that there is no Loan Balance outstanding. Any Loan Balance is subtracted to find the Net Cash Value.

Lapse - If the premium is not paid when due or before the end of a grace period, the Net Cash Value as of the date of Lapse will be applied under one of the following options. The owner may elect an option, upon Written Request, within 60 days after the date to which premiums have been paid. If no election is made, the Extended Term Option will apply. The basic life benefit continued under the Extended Term Option or Reduced Paid Up Option will not include additional benefits provided under any rider attached to this policy, unless specifically provided in such rider.

Extended Term Option - Under this option, the Net Cash Value is used to buy level term insurance. The amount will be equal to the stated Face Amount less any Loan Balance. The term of coverage will be that

which the Net Cash Value will buy when applied as a net single premium at the Insured's Age and class of risk as of the date of Lapse.

Reduced Paid Up Option - Under this option, the Net Cash Value is used to buy a level amount of whole life insurance. No further premiums are due. The amount will be that which the Net Cash Value will buy when applied as a net single premium at the Insured's Age and class of risk as of the date of Lapse.

Surrender Option - This policy may be surrendered for its Net Cash Value if it is then on a premium paying basis or Reduced Paid Up Option, at any time upon Written Request. The surrender will take effect on the date the Written Request is signed by you. Upon surrender, all insurance provided by the policy and any riders, unless the riders provide otherwise, will terminate.

If this policy is surrendered within 60 days after a Policy Anniversary, the Cash Value on the surrender date will not be less than it was on that Policy Anniversary date. If it is surrendered more than 60 days after a Policy Anniversary, due allowance will be made for time elapsed and any fractional premium payment. We can defer any payment under this provision for up to six months from the date we receive your Written Request.

Basis of Computation of Policy Values - Nonforfeiture values for this policy are shown in the Table of Policy Values. The nonforfeiture values are shown for the Age at which this policy was issued and at the end of certain Policy Years, with the assumption that premiums are paid to the end of those years and that there is no Loan Balance outstanding. The value at any time during a Policy Year will be calculated on the same basis, with allowance for any premium paid for part of the Policy Year. Nonforfeiture values for any Policy Years not shown will be furnished upon Written Request.

Nonforfeiture values and net single premiums are calculated using the Nonforfeiture Interest Rate shown in the Table of Policy Values, assuming immediate payment of claims.

The nonforfeiture values of this policy are not less than the minimum values and benefits required by the laws of the state in which this policy is delivered. On each Policy Anniversary, the value of any paid up insurance is equal to the net single premium at the Age of the Insured using the Nonforfeiture Interest Rate shown in the Table of Policy Values. A detailed statement of the method of computing nonforfeiture values has been filed with the proper supervisory officials of the state where this policy is delivered.

POLICY LOANS

Policy Loan - You may obtain a Policy Loan by Written Request provided this policy is not then in the Extended Term Option. The maximum amount available for Policy Loans will be 90% of the Net Cash Value. This policy will be the only security for the Loan Balance. We can defer a Policy Loan for up to six months from the date we receive your Written Request, but not if it is being used to pay premiums to us under an Automatic Premium Loan. Any Loan Balance will be deducted from any amounts payable by us under this policy.

Loan Interest Rate - Interest on any loan is payable at rates declared by us from time to time. This rate may change from year to year, but it will not exceed 8% per year. You will be notified of the current rate at the time of a loan. No increase in rate shall apply until 30 days prior notice has been given.

Repayment of Loan Balance - All or part of any Loan Balance may be repaid at any time while this policy is In Force. Failure to repay the Loan Balance will not terminate this policy unless the Loan Balance exceeds the Cash Value. If this happens, we will send a notice of termination to the owner and any assignee of which we have a record. We will mail this notice at least 30 days before terminating the policy.

Automatic Premium Loan - If this feature is in effect, any unpaid premium for this policy and attached riders, if any, which falls due one year or more from the Policy Date will be paid at the end of a grace period by an automatic loan. An automatic loan will not be granted if the premium due exceeds the Net Cash Value.

Automatic loans will be subject to all of this policy's provisions regarding Policy Loans. The loan will bear interest from the premium due date.

This feature will not take effect unless selected in the application or elected by Written Request. If active, this feature can be cancelled by Written Request.

GENERAL PROVISIONS

This Policy is Our Contract with You - This policy is issued in consideration of the application and the payment of premiums as provided in this policy.

This policy, any amendment(s) or endorsement(s), and a copy of the application(s) and any questionnaires for issuance or Reinstatement of the policy attached to it contain the entire contract between you and us. Any statements made in such application(s), questionnaires or any amendments thereto either by you or by the Insured will, in the absence of fraud (when such defense is permitted by the applicable law in the state where the policy will be delivered or issued for delivery) be considered representations and not warranties. Also, any written statement made either by you or by the Insured will not be used to void this policy nor defend against a claim under this policy unless the statement is contained in the application(s), questionnaires or any amendments thereto.

Any extra benefit rider attached to this policy will become a part of this policy and will be subject to all of the terms and conditions of this policy unless we state otherwise in the rider.

Incontestability - We cannot contest this policy, except for fraud (when such a defense is permitted by the applicable law in the state where the policy will be delivered or issued for delivery) or non-payment of premium, after it has been In Force during the lifetime of the Insured for two years after the later of:

1. The Date of Issue; and
2. The effective date of Reinstatement of this policy.

If this policy is Reinstated, a new two year contestability period (in addition to any remaining contestability period) will apply from the date of Reinstatement and will apply only to statements made in the application for Reinstatement.

The Insured, the owner and the Beneficiary are obligated to cooperate in any contestability investigation that we may conduct, including supplying us with necessary authorizations for medical and other information.

Amount Payable Is Limited in the Event of Suicide - If the Insured, whether sane or insane, dies by suicide within two years from the Date of Issue, our liability will be limited to an amount equal to the premiums paid for this policy.

If this policy is Reinstated, this section will be reinstated. A new two year period shall apply beginning on the date of Reinstatement. If the Insured, whether sane or insane, dies by suicide within two years from the Reinstatement date, our liability will be limited to an amount equal to the premiums paid from the date of Reinstatement.

Misstatement of Age or Sex in the Application - If there is a misstatement of the Insured's date of birth or sex in the application, we will adjust the death benefit to that which the premiums paid would have purchased at the correct Age or sex.

Extra Benefit Riders - The extra benefit riders, if any, are listed in the Policy Data.

Who Can Make Changes in the Policy - No change or waiver of any of the provisions of this policy will be valid unless it is made in writing by us. Any change or waiver must be signed by our President or a Vice President together with our Secretary. No agent or other person has the authority to change or waive any provision of this policy.

Termination of Insurance - This policy will terminate and all coverage on the Insured's life will end on the earliest of the following dates or events:

1. The date this policy Lapses; or
2. The date this policy is surrendered for its Net Cash Value by Written Request; or
3. The date of the Insured's death; or
4. The date the Loan Balance exceeds the Cash Value; or

5. The maturity date shown in the Policy Data. On the maturity date, we will pay the Net Cash Value to the owner.

Our acceptance of a premium for any period after the date of termination of this policy shall create no liability by us with respect to this policy, nor will it constitute a waiver of the termination. Any premium paid for this policy following its termination will be refunded.

No Dividends are Payable - This is non-participating insurance. It does not participate in our profits or surplus.

Your Rights - During the Insured's lifetime and unless otherwise provided in this policy, you have the exclusive right to assign this policy and to exercise every right, privilege and option this policy grants or that we allow. Some of your rights are:

- To change the owner or Beneficiary.
- To change the frequency of premium payments.
- To Reinstate the policy after Lapse in accordance with the Reinstatement provision.

To exercise any of these rights, or to apply for the death benefits or any benefits under this policy, communicate with our nearest representative or directly with our Administrative Office. Please notify us promptly of any change of address.

SETTLEMENT PROVISIONS

Lump Sum Payment - When the death benefit is payable, we will pay it in a lump sum, unless a settlement option is elected. We may discharge our obligation to make payment in a lump sum by providing you with drafts by which you may draw at any time all or any portion of the remaining benefit. If we do so, we will pay interest from time to time on any amount remaining unpaid. Such interest will be at a rate declared by us from time to time, and may differ from the rate we pay under the settlement options below. There is no minimum interest rate.

Settlement Options - During the Insured's lifetime, you may request that we pay the death benefit under one of the following settlement options. We will also use any other method of payment that is agreeable to you and us. After the Insured's death, a Beneficiary may elect to receive such Beneficiary's share of the death benefit under a settlement option. However, you may provide that the Beneficiary will not be permitted to change the settlement option you have selected. If a settlement option is requested, we will prepare an agreement to be signed which will state the terms and conditions under which the payments will be made. This agreement will include a statement regarding the withdrawal value, if any, and to whom any remaining proceeds will be paid following the death of the person receiving the payments.

Annuity - We will use the benefit as a single premium to buy an annuity. The annuity may be payable to one or two payees. It may be payable for life, or for a period certain, with or without a guaranteed period, as agreed to by the payee and us. The annuity payment will not be less than what our newly issued immediate annuity contracts with the same features are then paying.

Benefit Deposited with Interest - We will hold the benefit on deposit with us and it will earn interest from the date of death. Such interest will be at a rate declared by us from time to time, but not less than an annual interest rate of 1%, and may differ from the rate we pay under other options or as a Lump Sum Payment. We will pay the earned interest monthly, quarterly, semi-annually or annually, as requested. The payee may withdraw part or all of the benefit and earned interest at any time, but unlike for Lump Sum Payment, no drafts will be provided.

Conditions - Death benefits of less than \$10,000 will be paid in a lump sum and may not be applied under any settlement option. We may change the payment frequency if payments under an option become less than \$100.

A corporation may receive payments under a life income option only if the payments are based on the life of the surviving spouse or a dependent of the Insured.

Payments Exempt from the Claims of Creditors - To the extent permitted by law:

1. No payment of death benefit or interest we make will be subject to the claims of any creditor; and
2. If you provide that the option selected cannot be changed after the Insured's death, the payments will not be subject to the debts or contracts of the person receiving the payments.

SAMPLE
FROM CHOICE MUTUAL

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Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA
Administrative Office:
4333 Edgewood Rd NE
Cedar Rapids, IA 52499
(800) 238-4302

**Whole Life Insurance with
Death Benefit Payable at Death While the Policy is In Force
Premiums Payable for a Stated Period Shown in the Policy Data
Non-Participating - No Dividends**

Please examine your policy and the attached copy of the application carefully. Contact your agent if you desire additional services or information.

If you change your address, please notify us at our Administrative Office giving your full name and policy number.

Your policy is a valuable asset. For your own protection, let us advise you regarding any suggestion to terminate or replace this policy.

ACCELERATED DEATH BENEFIT RIDER

AN ACCELERATED DEATH BENEFIT MAY BE TAXABLE AND MAY TRIGGER OTHER TAXABLE EVENTS UNDER THE POLICY. AS WITH ALL TAX MATTERS, YOU SHOULD CONSULT A PERSONAL TAX ADVISOR BEFORE EXERCISING BENEFITS UNDER THIS RIDER.

THIS RIDER PROVIDES AN ACCELERATED DEATH BENEFIT THAT IS PAID INSTEAD OF THE CASH VALUE OR DEATH BENEFIT IN YOUR POLICY. PLEASE READ THIS RIDER CAREFULLY.

This Rider is part of the Policy to which it is attached. It is issued in consideration of the application and the continued payment of any required premium under the Policy. This Rider is subject to the provisions stated below. It is also subject to all conditions and provisions of your Policy not inconsistent with this Rider.

DEFINITIONS.

Acceleration Date- The "Acceleration Date" is the date that we make payment of the Accelerated Death Benefit.

Eligible Institution- An "Eligible Institution" is a licensed hospice care program which provides a coordinated, interdisciplinary program of hospice care services for meeting the special physical, psychological, spiritual and social needs of dying individuals and their families, by providing palliative and supportive medical, nursing, and other health services through a home-based care program or an inpatient hospice facility during the illness and bereavement.

Immediate Family- "Immediate Family" means a spouse, child, stepchild, brother, stepbrother, sister, stepsister, parent, stepparent, grandparent, or grandchild of the Insured or Owner.

Insured- The "Insured" under this Rider is the primary Insured under the attached Policy.

Owner- The "Owner" of this Rider is the same as the Owner of the attached Policy.

Physician- A "Physician" is a person licensed to practice medicine and treat injury or illness, in the state in which the Insured is treated, and who is acting within the scope of that license. A Physician must be board certified and a Physician must specialize in the treatment of the Qualifying Event for which the Insured is diagnosed. A Physician may not be the Insured, the Owner, a person who lives with the Insured or Owner, or a person who is a part of the Insured's or Owner's Immediate Family.

Physician Statement- A "Physician Statement" is a statement in a form acceptable to the Company and signed by a Physician which:

- (1) provides the Physician's diagnosis of the Insured's Qualifying Event; and
- (2) states with reasonable medical certainty that the Insured's Qualifying Event can reasonably be expected to result in the death of the Insured within 12 months from the date of the Physician Statement. This Statement must be made on the basis of the ordinary and reasonable medical care, advice, and treatment available in the same or similar communities.

Policy- As used in this Rider, "Policy" means the base life insurance policy to which it is attached. It excludes all other riders attached to that Policy.

Qualifying Event- A "Qualifying Event" means a medical condition from injury or illness which, as determined by a Physician:

- (1) can reasonably be expected to result in death within 12 months from the date of the Physician Statement; or
- (2) has required or requires extraordinary medical intervention, including but not limited to major organ transplant or continuous artificial life support, without which the Insured would die; or
- (3) usually requires continuous confinement in an Eligible Institution as defined in this Rider if the Insured is expected to remain there for the rest of his or her life; or
- (4) would result in a drastically limited life span of 12 months or less in the absence of extensive or extraordinary medical treatment. Such conditions include, but are not limited to:
 - a. coronary artery disease resulting in an acute infarction or requiring surgery;

- b. permanent neurological deficit resulting from cerebral vascular accident;
- c. end-stage renal failure; or
- d. Acquired Immune Deficiency Syndrome.

We- "We" means Transamerica Life Insurance Company. "Us," "our" and "ours" also refers to Transamerica Life Insurance Company.

BENEFIT. We will pay, in a lump sum, without life contingencies, the Accelerated Death Benefit to the Owner when we receive proof, satisfactory to us, that the Insured has been diagnosed with a Qualifying Event while the Policy and this Rider are In Force.

ACCELERATED DEATH BENEFIT. The Accelerated Death Benefit shall be equal to:

- (1) the Policy Death Benefit that would be In Force at the end of the 12 month period following the Acceleration Date, before deduction of any outstanding Loan Balance; less
- (2) a discount on the Accelerated Death Benefit calculated for the 12 month period using the interest rate described below; less
- (3) any outstanding policy loans, including accrued interest until the end of the 12 months following the Accelerated Date; less
- (4) any premiums which would be required to keep the Policy In Force for the 12 month period following the Acceleration Date for the Policy Amount of Insurance reduced by an appropriate discount using the interest rate described below.

We will determine the interest rate, but it will not exceed the maximum permissible rate for policy loans under the Policy. The Accelerated Death Benefit will never be less than the net cash value on the Acceleration Date.

Accelerated Death Benefits shall be effective for accidents on the effective date of the Rider and for illnesses that first manifest themselves more than thirty (30) days following the effective date of the Rider.

BENEFIT AND VALUE REDUCTION. The Accelerated Death Benefit under this Rider may only be elected once. When elected, the attached Policy and any attached Riders will Terminate. The Policy's Death Benefit and Net Cash Value, if any, will Terminate on the date the Accelerated Death Benefit is paid.

BENEFIT CONDITIONS. We will pay the Accelerated Death Benefit subject to all of the following conditions:

- (1) Receipt of a Request in a form acceptable to us. The Request must be signed by the Owner and the Insured;
- (2) Any irrevocable beneficiary or assignee must give written consent to the payment of this benefit; and
- (3) The Owner must provide a Physician Statement and any other proof we may require. We shall have the right to seek a second medical opinion at our expense. We shall also have the right to have the Insured examined by a Physician we chose at our expense. If the Physician we choose provides a different diagnosis of the Insured's medical condition, we shall have the right to rely on the statement from our Physician.

PROOF OF QUALIFYING EVENT. We must receive proof of the Insured's Qualifying Event at our Administrative Office. This proof shall include a completed Request, in a form acceptable to us and a Physician Statement. We may request additional medical information from the Physician who submits the Statement.

PAYING PREMIUMS. No additional premium is payable for this Rider.

EFFECTIVE DATE. The Effective Date of this Rider is the date this Rider was issued. It is used to determine Rider years and anniversaries.

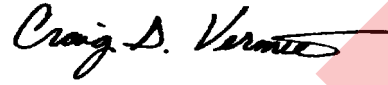
INCONTESTABILITY. Except for fraud, we will not contest this Rider after it has been In Force during the lifetime of the Insured for two years from the Effective Date. If the Policy Amount of Insurance is changed after the Rider Effective Date, and such changes increase the benefits under this Rider, we may contest the increase for two years from the date of the increase.

OTHER INSURANCE. All other riders attached to the Policy shall Terminate, subject to any paid-up or conversion options, upon payment of any benefit under this Rider.

TERMINATION. This Rider will automatically Terminate when your Policy Terminates or lapses or matures or is continued under one of the nonforfeiture options; or when we have paid the Accelerated Death Benefit; whichever occurs first.

Signed for the Company at Cedar Rapids, Iowa.

TRANSAMERICA LIFE INSURANCE COMPANY



Craig D. Vermie
Secretary

SAMPLE
FROM CHOICE MUTUAL



Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA
Administrative Office:
4333 Edgewood Rd NE
Cedar Rapids, IA 52499
(800) 238-4302

(Referred to as the Company, we, our or us)

CHILDREN'S AND GRANDCHILDREN'S BENEFIT RIDER

We have issued this rider as a part of the policy to which it is attached. Except as otherwise specifically set forth below, it is subject to all of the terms of the policy.

Rider Benefit If a covered child dies while insured under this rider, we will pay the face amount of this rider as set forth below. The face amount of this rider is shown in the Policy Data. Payments are subject to the provisions of the policy and this rider.

Limitation of Coverage The maximum amount payable on the life of one covered child under all riders issued by us or our affiliates covering children or grandchildren of an insured is limited to \$5,000. If we reduce the amount payable under this rider because of this limitation, we will refund the premiums attributable to the amount of the reduction.

Payment of Proceeds Unless you request otherwise, any proceeds payable under this rider will be paid to you. You may request that any proceeds will be paid to a beneficiary other than you by:

1. Naming the beneficiary in accordance with the How to Change a Beneficiary provision of the policy; and
2. Specifically stating that the beneficiary designation is applicable to insurance provided under this rider.

Any proceeds may be applied under the Settlement Provisions of the policy.

Definitions **Age** has the meaning described in the policy.

Insured means the Insured under the policy to which this rider is attached. It does not include any other individuals covered under other riders.

Child or grandchild of the Insured means a person who is the natural child, stepchild or legally adopted child (a) of the Insured, or (b) of a natural child, stepchild or legally adopted child of the Insured.

Covered child means a child or grandchild of the Insured who is named on the application for this rider and who:

1. is between the age of 15 days old and 17 years old on the date coverage is effective under this rider; and
2. is not excluded by us.

Covered child also includes a person who becomes a child or grandchild of the Insured after the Rider Date, if you meet all of the requirements of the Adding a Covered Child provision and we approve such coverage.

No coverage is provided under this rider for any person unless that person is named in the application for this rider or we confirm to you in writing that the person has been added as a covered child.

No coverage is provided for any person we exclude.

Adding a Covered Child

If a person becomes a child or grandchild of the Insured after the Rider Date, you may request that he or she be included as a covered child under this rider. To add a covered child, you must send us a Written Request to us within 60 days of the date the person becomes a child or grandchild of the Insured, together with such additional information as we may require in order to confirm the child is then living and is eligible for coverage under this rider.

In order to be approved by us as a covered child, a person must be at least 15 days old but not yet 18 years old at the time of your Written Request. The effective date of coverage for any person added as a covered child is the date of our confirmation of your request to add such person.

No more than nine children or grandchildren of the Insured may be covered under this rider.

Conversion

You may convert the coverage on a covered child to a new policy of permanent insurance we make available at that time for such purpose as follows:

1. At any time after coverage for that covered child has been in effect for at least two years and prior to the covered child's 22nd birthday; or
2. On the death of the Insured while this rider is in effect and prior to the covered child's 22nd birthday.

Request and Payment of Premium – The new policy will be issued upon Written Request for conversion and payment of the required premium. The Written Request must be made by the owner of the policy to which this rider is attached, if living; otherwise, it must be signed by the person who is to be the owner of the new policy. We must receive the Written Request for conversion and payment of the required premium before, or within 31 days after the covered child's 22nd birthday; or within 90 days after the death of the Insured.

Face Amount – The face amount of the new policy may not exceed the face amount of this rider and may not be less than our published minimum for the plan selected. There will always be a plan available in an amount to which you can convert.

Effective Date - The new policy will be dated as of the date of the conversion. Coverage under this rider will terminate when coverage under the new policy begins. If this rider or insurance on a covered child has terminated and has not yet been converted, no insurance will be in effect under this rider or any new policy during the period between the date coverage terminates and the effective date of the new policy.

Ownership – The child or grandchild will be the owner of the new policy unless the child or grandchild is a minor as defined under the laws of the child's or grandchild's state of residence at the time of the conversion request. If the child or grandchild is a minor at the time of the conversion request, you will be the owner of the new policy unless you request otherwise. If you are not living at the time of conversion, the legal guardian of the child or grandchild will be the owner.

Premiums – The premiums for each new policy will be at our published rate for the plan selected and the child's or grandchild's age at the time of conversion. Even if premiums for this rider are being waived under a rider attached to the policy at the time of conversion, the premiums under any new policy will not be waived.

Additional Terms – If coverage under this rider is converted in accordance with these conditions, the amount of insurance converted will not be subject to the new policy's suicide and contestability periods.

Termination

This rider will terminate on the earliest of the following dates or events:

1. The death of the Insured; or
2. The next Monthly Anniversary Date following the date you request termination of this rider; or
3. The date the policy Lapses; or
4. The date the policy is surrendered or continued under any nonforfeiture option; or
5. The date the policy matures or terminates; or
6. The date the policy is converted to another policy.

Insurance on a covered child under this rider will terminate on the earliest of the following dates or events:

1. The Policy Anniversary on or following such child's or grandchild's 25th birthday; or
2. The date insurance for that child is converted to a new policy; or
3. The death of that child or grandchild.

Any premium paid for any period after the date of termination of this rider or insurance on a covered child shall create no liability for us, nor will it constitute a waiver of the termination. Any premium paid for this rider following its termination or termination of insurance on a covered child will be refunded to you.

Reinstatement

If the policy is reinstated, this rider may be reinstated at the same time.

Consideration

We have issued this rider in consideration of the application and payment of the premiums.

Premiums

Separate charges are payable for each covered child. These charges are shown in the Policy Data or in the letter we send confirming coverage for a covered child. No charges for this rider will be payable after this rider terminates.

Incontestability

The provisions of the policy relating to incontestability apply to this rider. However, if this rider is added after the Date of Issue of the policy, the contestable period will be measured from the later of the Rider Date or the date this rider is reinstated.

Suicide

The suicide provision of the policy will not apply to death of a covered child by suicide.

Misstatement of Age

If a child's or grandchild's date of birth is not correctly stated and the correct date of birth would have affected that person's eligibility for coverage under this rider or would have resulted in termination of that person's coverage prior to that person's death, our liability under this rider for that person will be limited to an amount equal to the premiums paid for such person during the period of ineligibility.

No Dividends are Payable

This rider does not participate in our profits or surplus.

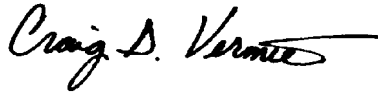
Nonforfeiture Values

This rider does not have cash values or loan values.

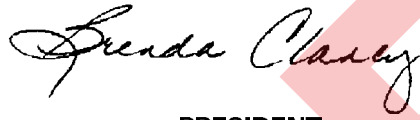
Rider Date

The Rider Date of this rider will be the Policy Date, unless we inform you in writing of a different date.

Signed for us at our home office.



SECRETARY



PRESIDENT

SAMPLE
FROM CHOICE MUTUAL



Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA
Administrative Office:
4333 Edgewood Rd NE
Cedar Rapids, IA 52499
(800) 238-4302

(Referred to as the Company, we, our or us)

ACCIDENTAL DEATH BENEFIT RIDER

Rider Benefit	If the Insured dies while insured under this rider and the death is an Accidental Death as defined in this rider, we will pay the face amount of this rider as set forth below. The face amount of this rider is shown in the Policy Data. Payments are subject to the provisions of the policy and this rider.
Payment of Proceeds	Any proceeds payable under this rider will be paid to the Beneficiary under the policy. Any proceeds may be applied under the Settlement Provisions of the policy.
Definitions	Accidental Bodily Injury means an injury that, directly and independently of all other causes, results solely from external and involuntary causes. The Accidental Bodily Injury must occur on or after the Rider Date. Accidental Death means loss of life that, directly and independently of all other causes, results solely from an Accidental Bodily Injury. The death must occur within 90 days of the Accidental Bodily Injury. Insured means only the Insured under the policy to which this rider is attached. It does not include any other individuals covered under other riders.
Risks Not Covered	No benefits will be payable under this rider if the Insured's Accidental Bodily Injury or death is caused by or contributed to by, or results directly or indirectly, wholly or in part, from: 1. Suicide or any attempted suicide or self-inflicted injury, while sane or insane. 2. Intoxication as defined by the jurisdiction in which the accident occurred. 3. An infection except when caused directly by Accidental Bodily Injury. 4. Disease or infirmity of mind or body, or medical or surgical treatment for such disease or infirmity. 5. The voluntary intake or use by any means of: a. Any drug, unless administered in accordance with a physician's advice and written instruction; or b. Any poison or gas voluntarily or involuntarily, accidentally or otherwise taken, administered, absorbed or inhaled. 6. The commission of, or attempt to commit, a felony. 7. Travel in or descent from any kind of aircraft except as a passenger on a regularly scheduled commercial aircraft. 8. Active participation in a riot, insurrection or terrorist activity. 9. War, declared or undeclared, or any act of war. 10. Riding or driving an air, land or water vehicle in a race, speed or endurance contest. 11. Participation in an illegal occupation or activity. 12. Bungee jumping or mountain or rock climbing. 13. Hang-gliding, skydiving, parachuting, ultra light soaring, ballooning, or parasailing.

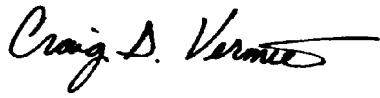
Any defense of a claim under this rider based on the Risks Not Covered shall not be construed to be a contest of this rider.

Notice of Claim	Notice of claim must be given to us at our Administrative Office. Such notice should be made within 30 days after any loss covered by the rider unless it is not reasonably possible to give notice within that time period.
Proof of Loss	Written proof of loss must be given to us at our Administrative Office. Proof must be sent within 90 days after the date of such loss. If it was not reasonably possible to give notice and/or written proof in the time required, we shall not reduce or deny the claim for this reason if the notice and/or proof are filed as soon as reasonably possible. In any event, the notice and proof required must be given no later than one year after the date of such loss unless the claimant was legally incapacitated.
Autopsy	We have the right to have an autopsy performed at our expense, unless prohibited by law.
Non-Convertible	This rider is not convertible.
Termination	This rider will terminate on the earliest of the following dates or events: 1. The Policy Anniversary at the Insured's Age 80. 2. The death of the Insured. 3. The next Monthly Anniversary Date following the date you request termination of this rider 4. The date the policy Lapses. 5. The date the policy is surrendered or continued under any nonforfeiture option. 6. The date the policy matures or terminates. Any premium paid for any period after the date of termination of this rider shall create no liability for us, nor will it constitute a waiver of the termination. Any premium paid for this rider following its termination will be refunded to you.
Reinstatement	If the policy is Reinstated, this rider may be reinstated at the same time.
Consideration	We have issued this rider in consideration of the application and the payment of the premium for this rider.
Premiums	The charges for this rider are shown in the Policy Data and are payable as provided in the policy. No charges for this rider will be payable after this rider terminates.
Incontestability	The provisions of the policy relating to incontestability apply to this rider. However, if this rider is added after the Date of Issue of the policy, the contestable period will be measured from the later of the Rider Date or the date this rider is reinstated.
No Dividends are Payable	This rider does not participate in our profits or surplus.
Nonforfeiture Values	This rider does not have cash values or loan values.

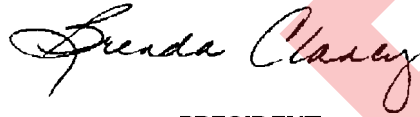
Rider Date

The Rider Date of this rider will be the Policy Date, unless we inform you in writing of a different date.

Signed for us at our home office.



SECRETARY



PRESIDENT

SAMPLE
FROM CHOICE MUTUAL

Run Date: 09/05/13
Run Time: 05:32:19

D O C U M E N T - V03 R02 L01
M E R G E S E T E R R O R S

Merge Set ID Tag: 528201M034
Merge Set Number: 18
Grouping Name: FILE.LIICA.NB
Merge Def: 4635
Print Def: 4635
Printer ERRDDN: See message DMGMRG398I
Page Number: 1

DMGMRG250C DMGRFMT determined the following Missing Forms:
DMGMRG252I Form: 528201M034CPNT 00000
DMGMRG252I Form: 528201M034BNNR 00000

DMGMRG398I Printer ERRDDN: LIICANE

SAMPLE
FROM CHOICE MUTUAL

SEPARATOR PAGE

528201M032
JOINT CASE #: 0000000

SHIRLEY GERLACH

INDEX PAGE – BEGIN

MO: 02
ADMIN SYSTEM: 97.01
OPERATOR ID: U165
POLICY #: 528201M032
ISSUE DATE: 07/01/2013
INSURED: SHIRLEY GERLACH
AGE: 66
SEX: FEMALE
RATE CLASS INDICATOR: Q
RATE CLASS DESC: PREFERRED TOBACCO
OWNER: SHIRLEY GERLACH
STATE: IA
COMPANY #: 07
COMPANY NAME: TRANSAMERICA LIFE INSURANCE COMPANY
PMT METHOD: PAC
PMT MODE: MONTHLY
DEATH BENEFIT OPTION:
COMPLIANCE TEST:

COVERAGES

WL08
ADR10
CR13
CR13
R05401

PLANS

TD12DL
TD5AD8
TD540C
TD540C
TD5ABM

MET FORMS

WL081 WL082 WL083 WL084 ADR10 CR13 R5401T GANIA PRVNTSTD BGNAIC12

INDEX PAGE - END

HOME OFFICE ACCOUNT
0000029902