

Outstanding Requirements

Policy No.: 6600270645
Insured(s): FRANCISCO E RODRIGUEZ P

Below is a list of requirements which are part of the delivery of this policy and are due back within 30 days.

POLICY DELIVERY RECEIPT

Please have the Policy Owner and Producer sign and date the Company's Copy and the Policy Owner's Copy. The Policy Owner's copy should be retained by the Policy Owner and inserted in the policy. Please return the Company's Copy to Transamerica.

AMENDMENT

The enclosed Application Amendment must be signed by the Policy Owner. If a signature line for the proposed Insured is included on this form please ensure it is signed by the Insured if different than the Owner. If the Owner and the Insured are one and the same, the Policy Owner will sign as both the Owner and Insured. After signing the Amendment please return to Transamerica. A 2nd copy of the Amendment can be found within the policy contract. This copy should be signed and retained by the Policy Owner.

ILLUSTRATION

Sign on Delivery

Transamerica Premier Life Insurance Company
Transamerica Financial Foundation IUL®
Flexible Premium Adjustable Life Insurance with an Index Account Option

Numeric Summary

Francisco Rodriguez P
Male Age 26 Preferred Elite
Riders: None

Initial Monthly Premium: \$350.00
Initial Face Amount: \$450,000
Death Benefit Option Type: Guideline/Increasing DB
Total Lump Sum: \$150

I have received a copy of this illustration, and understand that any non-guaranteed elements illustrated are subject to change and could be either higher or lower. **The Sales Representative has explained that this is a hypothetical illustration containing non-guaranteed elements and it is not intended to predict actual performance of the policy.**

Francisco Rodriguez

15 Jun 2017

Applicant

Date

I certify that this illustration has been presented to the applicant and that I have explained that any non-guaranteed elements are subject to change. I have made no statements that are inconsistent with the illustration.

Authorized Company Representative

Date

INDEX UNIVERSAL LIFE INSURANCE IS NOT A SECURITY and index universal life insurance policies are not an investment in the stock market or in the indexes. Index Account Interest is based, in part, on index performance.

Past performance of an index is not an indication of future index performance. There is no guarantee that any Excess Index Interest will be credited above the guaranteed minimum interest rate for the Index Account(s). Additionally, there is no guarantee that the company will declare an interest rate greater than the guaranteed minimum interest rate for the Basic Interest Account.

This is an illustration only, not an offer, contract, or promise of future policy performance. Non-guaranteed rates and values shown are illustrative only and may not apply to an actual policy. Coverage is subject to the terms and conditions of the policy.

This illustration is not valid without all 26 pages.

DELIVERY CERTIFICATE

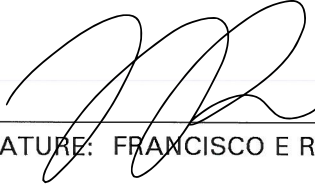
POLICY/CERTIFICATE: 6600270645

INSURED: FRANCISCO E RODRIGUEZ P

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.

15 Jun 2017

DATE



OWNER'S SIGNATURE: FRANCISCO E RODRIGUEZ P

SALES REPRESENTATIVE

IMPORTANT NOTICE:

Delivery Deadline - JUNE 27, 2017

PLEASE RETURN THIS SIGNED FORM TO: TRANSAMERICA PREMIER LIFE INS. CO.
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 inforce, and has been set up on a Monthly check-o-matic basis.

The premium received with the application will be applied to pay the June premium. Each premium due hereafter will be drafted on the 1st through the check-o-matic for \$ 350.00 .

California law requires that this signed form be returned to the home office for record of receipt.

AMENDMENT OF APPLICATION

Proposed Insured: FRANCISCO E RODRIGUEZ P
Proposed Owner: FRANCISCO E RODRIGUEZ P

The application to Transamerica dated, May 05, 2017
on the above named Proposed Insured is hereby amended as follows:

FRANCISCO E RODRIGUEZ P
Section 11, Initial Planned Premium Amount:
\$ 350.00

FRANCISCO E RODRIGUEZ P
Section 1, Face Amount:
\$ 450,000.00

The undersigned agrees that these changes shall be an amendment to and form a part of the original application and of the Policy/Certificate issued thereupon, if any, and that they shall be binding on any person who shall have or claim any interest under such Policy/Certificate.

The undersigned declares that there has been no change in the Proposed Insured's occupation, residence, or family history, that the Proposed Insured has suffered no illness or injury or other change in health condition, or been cited, charged or convicted of any criminal violation, and that no company or association has taken adverse action with reference to the Proposed Insured's insurability since the date of the Proposed Insured's application to Transamerica

The undersigned declares that they have signed a copy of the amendment attached to, and made a part of, the Policy/Certificate issued on this application.

Dated at _____ day 15 month June year 2017

{Proposed Owner}

Licensed Agent

{Proposed Insured if Other Than Proposed Owner
Or Parent/Legal Guardian If Proposed Insured is a
Minor}

TO BE ATTACHED AND MADE PART OF POLICY/CERTIFICATE NO. 6600270645

**PLEASE RETURN ONE COPY TO THE ADMINISTRATIVE OFFICE
NEW BUSINESS DEPARTMENT**



Secretary



President