Federal Kemper Life Assurance Company
Fidelity Life Association, A Mutual Legal Reserve Company
Kemper Investors Life Insurance Company
Zurich Life Insurance Company of America



## **ILLUSTRATION CERTIFICATE**

For The Applican	t To C	omplete:				
I certify that: (Please check the appropriate box)		I viewed a compute as shown in the low illustration was furn	r screen illustration l er portion of this for nished.	pased on the informat m. No paper copy of	ion the	
$\square$ No illustration conforming to the policy applied for was provided to me.						
I understand that at the time the po			to the policy as may b	e issued will be provide	ed to me no later than	
Proposed	Insure	ed's Name	Proposed Insure	d's Date of Birth		
Signature of Applicant			Print Name of Applicant		Month/Day/Year	
To Be Completed	Only	By The Agent:				
I certify that: (Please check the		I displayed a computer screen illustration based on the information as shown below. No paper copy of the illustration was furnished.				
appropriate box)		Gender: Age: Underwriting or Ra Type of Policy: Initial Death Benefi Policy Number:	<u> </u>	☐ Male	Female	
		No illustration conf	forming to the policy	applied for was prov	ided by me.	
Signature of Agent			Print Agent Name		Month/Day/Year	

Form to be completed in all cases originating in states that have adopted the new illustration resolutions. Please attach the completed form to the application materials forwarded to the Company.