

DemoLife Life Insurance Company
DemoLife Financial Life Insurance Company

**Consent to do Business Electronically and Electronic Delivery of
and/or Access to Policy Documents**

What is the purpose of this Consent and Disclosure?

You are applying for an insurance policy ("Policy") from either DemoLife Life Insurance Company or DemoLife Financial Life Insurance Company (either individually or collectively, "DemoLife") and have expressed your desire to conduct business electronically and for electronic delivery and access, with regard to the Policy, as well as documents related to the Policy. To conduct business electronically, receive documents applicable to the Policy in electronic format, and access documents electronically via a hyperlink contained in an electronic mail ("email") or attached to an email, you must provide DemoLife, and its authorized designees and agents, with your consent. If you indicated your consent by electronically signing this document where indicated below, you will be providing DemoLife and its authorized designees and agents, with your consent:

1. To have the information described in this document (Consent to do Business Electronically and Electronic Delivery of and/or Access to Policy Documents, hereinafter referred to as "Consent") made available and delivered to you electronically;
2. To execute via electronic means the documents that are described in this Consent;
3. To submit, via electronic means, your application for an insurance product; and
4. To all of the terms and conditions set forth in this Consent.

What does this Consent cover once I consent?

This Consent covers your agreement to all of the terms and conditions of this Consent, including your agreement to:

1. Permit the Owner of the Policy to receive via electronic means the documents that DemoLife is required by law or regulation to provide or make available to you in writing ("Required Documents"), as well as other information and documents (collectively, "Other Documents");
2. Permit the Owner of the Policy to receive via electronic means privacy notices from DemoLife, including those companies on whose behalf DemoLife sends privacy notices, including World Group Securities, Inc. and DemoLife Financial Advisors, Inc., as well as from any affiliate or subsidiary companies administering or supporting any Policy issued as part of your application (collectively "Privacy Notices");
3. Permit the Owner and Insured (and Third Party, if applicable) to submit via electronic means your application for an insurance product;
4. Permit the Owner and Insured (and Third Party, if applicable) to execute via electronic means certain Required Documents and Other Documents; and
5. Be bound with the same force and effect as if you had signed your name on paper by hand when you electronically sign this Consent where indicated below and click "OK" or otherwise apply your electronic signature to Required Documents or Other Documents.

NOTE: IF THE OWNER IS NOT THE INSURED, THEN BOTH WILL NEED TO SIGN THE CONSENT BELOW

What is the Scope of this Consent?

This Consent applies to all documents related to your Policy, including, but not limited to, the following: Privacy Notices, prospectuses, prospectus supplements, annual and semiannual reports, annual and quarterly statements, confirmation statements, statements of additional information, proxy solicitation materials, conditional receipts, application, application supplements and addendums, Policy contract, illustrations, amendments, riders, replacement notices, customer correspondence, and any other Required Documents and Other Documents when available (collectively, "Policy Documents"). These Policy Documents will generally be accessible through a hyperlink delivered via email to the Owner's email address(es) written below when electronic access to the various Policy Documents is available from DemoLife.

Even though you have provided DemoLife with this Consent, DemoLife may, at its option, or as required by law: (a) deliver Policy Documents to you on paper, and (b) require that certain communications from you be delivered to DemoLife on paper.

Can I get paper copies of the Policy Documents?

Yes. You may obtain paper copies of any of the Policy Documents at any time and without charge by contacting DemoLife at the address provided below. If you do not wish to access all Policy Documents electronically, please call DemoLife's Customer Service Department at the telephone number provided below.

Should I maintain copies of the Policy Documents?

Yes. You agree to print or save this Consent and all Policy Documents, and to keep printed or electronic copies of them for your records. If you have any trouble with printing or saving, you should contact DemoLife.

How long will this Consent remain in effect?

This Consent shall become effective once you sign below and remains in effect for so long as your Policy remains in effect, or until you withdraw your consent (as described in the next section), whichever occurs first.

What if I change my mind?

If at any time you would like to cease doing business electronically with DemoLife with respect to your Policy, you will need to provide DemoLife with written notice of your withdrawal of your consent to do so, which will then terminate this Consent. You may withdraw consent at any time and without charge by contacting DemoLife. Your withdrawal of consent and the termination of this Consent will become effective two (2) business days after DemoLife's receipt of your withdrawal. Thereafter, all Policy Documents will be provided to you on paper and you will no longer be able to conduct business with us electronically, unless you provide your consent again.

What if my contact information changes?

You must keep DemoLife informed of any changes to your email address(es) and all other contact information by contacting DemoLife at the contact information provided below. You agree to hold DemoLife harmless with respect to any emails sent to the incorrect email address due to your failure to provide DemoLife with a current or valid email address.

You can contact DemoLife as follows:

For all products except DemoLife Heritage IUL:

Mail: 2700 Commerce Street
Dallas, TX 75226
Telephone: 1-800-661-5910
Internet: www.DemoLife.com

For Financial Heritage IUL:

Mail: 2700 Commerce Street
Dallas, TX 75226
Telephone: 1-800-661-5910
Internet: www.DemoLife.com

Are there any hardware or software requirements?

Yes. To access, receive, and retain the Policy Documents sent or made available to you electronically by DemoLife, you must have access to a computer with an Internet connection. You must have a valid email address, be able to send and receive emails, and be able to save the Policy Documents to a storage device for later reference or have the computer connected to a printer so you can print out such documents. Unless notified otherwise, DemoLife will be providing or making available these documents to your agents and insurance representatives. The minimum hardware and software requirements are:

Computer Compatibility

Item	Minimum
Memory (RAM)	2 GB
Hard Drive Space	1 GB available for storage of electronic documents
Operating System	Windows Vista with Service Pack 2 or a later version MAC OS 10.x or higher
Screen Resolution	1060 x 800 pixels at 16-bit color resolution
Screen Display Size	12 inches measured diagonally
Browser Application	Internet Explorer 9.0 or higher with all critical updates Mozilla Firefox Google Chrome Safari 5 or higher *** We will <u>not</u> support beta versions of any browsers.
PDF Reader	Adobe Acrobat Reader 6.0 or higher
Speed	DSL or broadband service

Mobile Device Compatibility

Operating Systems	Apple Devices: iOS7 or higher Android Devices: Android 4 or higher
--------------------------	---

You should check the Technical Requirements periodically for updates on supported software and browsers. From time to time we may offer services or features that require a certain type of browser or configuration. If we detect that your browser is not properly configured, we may provide you with a notice on how to properly update your browser. Also, the browsers we support may change over time. We reserve the right to discontinue supporting a certain browser or operating system if we believe that it suffers from a security flaw or other flaw that makes it unsuitable for use with the insurance products.

What else should I know about this Consent?

Your consent is voluntary. If you consent, you are consenting to conduct business electronically and to receive and access Policy Documents electronically. You cannot consent to receive or access Policy Documents electronically without consenting to conduct business electronically. However, if you wish to consent to conduct business electronically but do not wish to receive or access Policy Documents electronically, you need to sign this Consent and call DemoLife's Customer Service Department at the telephone number provided above to opt-out of electronic delivery and/or access and to receive Policy Documents by mail.

There is no charge for electronic delivery of Policy Documents, although your internet provider may charge for internet access. Unless required by law, you will NOT receive electronic copies in addition to papercopies.

For California Only: An additional consent for electronic delivery may be required before Required Documents are delivered to you electronically. Absent an additional consent, Policy Documents other than Required Documents may be delivered electronically under this Consent or DemoLife may elect to deliver all Policy Documents by mail.

By signing below, I attest that I: (i) have carefully read this Consent using computer hardware and software that meet the minimum hardware and software requirements described above; (ii) agree to conduct business electronically; (iii) agree to receive all mailings and communications, which may even include cancellation or nonrenewal notices, electronically; (iv) agree to receive Policy Documents in electronic format; (v) agree to access Policy Documents electronically; and (vi) accept and sign this Consent voluntarily and with full knowledge and understanding of its terms and conditions. I will save a copy of this Consent.

Christopher R Smith
Name of Insured

christopher.smith@example.com
Insured Email Address

Christopher R Smith
Signature of Insured

10/29/2025
Date

585-455-5555
Phone Number of Insured

Please check the box below or complete Owner information. Complete Additional Owner information, if applicable.

Owner is same as Insured

Name of Owner, if other than Insured

Owner Email Address

Signature of Owner, if other than insured

Date

Phone Number of Owner, if other than insured

Additional Owner Email Address

Name of Additional Owner, if applicable

Date

Signature of Additional Owner, if applicable

Note: If there are more than two (2) Additional Insureds, please complete additional forms.

Name of Additional Insured (if any)

Email Address of Additional Insured (if any)

Signature of Additional Insured (if any)

Date

Name of Additional Insured (if any)

Email address of Additional Insured (if any)

Signature of Additional Insured (if any)

Date

IF THERE ARE THIRD PARTIES SIGNING REQUIRED DOCUMENTS OR OTHER DOCUMENTS, PLEASE HAVE THEM COMPLETE THE INFORMATION BELOW. FOR ADDITIONAL THIRD PARTIES, PLEASE COMPLETE ADDITIONAL FORMS.

Name of Third Party

Status of Third Party (e.g., Guardian, Payor, etc.)

Signature of Third Party

Date

Name of Additional Third Party

Status of Third Party (e.g., Guardian, Payor, etc.)

Signature of Additional Third Party

Date

Name of Trustee

Signature of Trustee

Date

Name of Authorized Person

Signature of Authorized Person

Date