

**Universal/Whole Life Illustration Request Form**  
**Target Insurance Services**  
**Fax: (913) 384-3781**

Today's Date: \_\_\_\_\_ Issue State: \_\_\_\_\_ Agent Name: \_\_\_\_\_

Product Type:       UL    SUL    WL    SWL    Single Premium

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

***Client Information***

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex:    M    F  
Tobacco Use:    Y    N

Risk Class:    Standard  
                   Preferred  
                   Sub-Standard       Flat Extra \$ \_\_\_\_\_ For \_\_\_\_\_ Years  
                   Rating Table \_\_\_\_\_

***Second Life Information***

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex:    M    F  
Tobacco Use:    Y    N

Risk Class:    Standard  
                   Preferred  
                   Sub-Standard       Flat Extra \$ \_\_\_\_\_ For \_\_\_\_\_ Years  
                   Rating Table \_\_\_\_\_

***Product Information***

Death Benefit: \$ \_\_\_\_\_    Level       Adjustable      Adjustable to Level (Age to Switch \_\_\_\_\_)

Riders: \_\_\_\_\_

Premium Amount: \$ \_\_\_\_\_       Mo    Qtrly    Semi-Ann    Annual

Whole Life Proposal Type:    Natural Offset       Dividends to buy paid up additions  
   Dividends to offset premium    Dividends paid in cash

Last age make payment \_\_\_\_\_      1035 Exchange Amount \$ \_\_\_\_\_

Solve For:

Payment:       Endow at Age \_\_\_\_\_ Or       Dollars \$ \_\_\_\_\_ at age \_\_\_\_\_  
 Years to Pay \_\_\_\_\_       Pay to age \_\_\_\_\_

***Income Solve***

Age benefits to begin \_\_\_\_\_      Years to receive benefits: \_\_\_\_\_      Endow:    Y    N

All income solve are assumed withdrawal to basis then loans