



CMFG Life Insurance Company

Home Office:
2000 Heritage Way • Waverly, IA 50677
Administrative Office:
5910 Mineral Point Road • Madison, WI 53705
Phone: 800.356.2644

Insurance Subsequent Action

Borrower 1 Name Account No. Date

Borrower 2 Name Account No.

SUBSEQUENT ELECTION OF CREDIT INSURANCE PROTECTION

If You are electing voluntary credit insurance after the date Your Loan was funded or after the date of any Advance on the Loan, You agree to pay the insurance charge for credit insurance by:

- making more payments of the same amount until what You owe has been repaid.
increasing Your monthly payment to \$

For Open-End plans, Your election for credit insurance applies to:

- the entire Open-End plan (all existing and future Advances).
Advance/sub-account:

DECLINATION OR CANCELLATION OF CREDIT INSURANCE PROTECTION

By signing below, you elect to decline or cancel the indicated coverage on loan/subaccount number(s) . This declination or cancellation will be effective on the later of or the date of your signature.

Check appropriate box and enter name of borrower(s) declining coverage:

- Credit Life for (Name of Borrower(s))
Credit Disability for (Name of Borrower(s))

NOTE: For Open-End Plans, you understand that all other plan subaccounts that were initially covered by credit insurance will continue to be covered unless you cancel specific subaccounts or waive the entire plan.

SIGNATURES

Borrower 1 Signature Date
X (Seal)

Borrower 2 Signature Date
X (Seal)