

## Credit Report of New Business and Cancellations

Subject to acceptance by the Home Office, we have issued or cancelled the policies or group certificates covered by this report for the month ending \_\_\_\_\_.

|  |                               |                                  |
|--|-------------------------------|----------------------------------|
| Acct.<br>Name                              | Acct.<br>No.                  |                                  |
| Address                                    |                               |                                  |
| List Policies or Group Certificates Issued | Total Number<br>of New Issues | Total Number<br>of Cancellations |
|  |                               |                                  |
|  |                               |                                  |
|  |                               |                                  |

### Separate business being reported by Life\* and Disability coverage

\*Life and disability coverages can be reported under any life column if fee is the same on all types.

|   | Single<br>Life | Joint<br>Life | Single<br>Disability | Joint<br>Disability | Total |
|---|----------------|---------------|----------------------|---------------------|-------|
| 1. Fee  | %              | %             | %                    | %                   |       |
| 2. Gross Premium on Policies Written  |                |               |                      |                     |       |
| 3. Gross Amount of Premium Refunded for<br>Cancellations. (Total from back side)  |                |               |                      |                     |       |
| 4. Net Premiums (line 2 less line 3)  |                |               |                      |                     |       |
| 5. Fee Amt. (line 1 times line 4)   |                |               |                      |                     |       |
| 6. Net Premiums Due (line 4 less line 5)  |                |               |                      |                     |       |
| 7. Net Amount Due   CSO <input type="checkbox"/> Account <input type="checkbox"/> |                |               |                      |                     |       |

NEW BUSINESS – Attach Home Office copy of application or certificate.

CANCELLATIONS – Attach Customer's policy or certificate or cancellation receipt signed by the customer.  
List cancellations on the reverse side of this report.

Home Office use only

Remarks \_\_\_\_\_

Please make checks payable to: Central States Health & Life Co. of Omaha

Send to: CSO  
P.O. Box 8670  
Omaha, NE 68103-0670



# CANCELLATIONS

\*Life and Disability coverages can be reported under any life column if fee is the same on all types.  
Cancelled policies or certificates may be listed below:

|     | Policy or<br>Certificate<br>Number | Insured | Single<br>Life<br>Refund | Joint<br>Life<br>Refund | Single<br>Disability<br>Refund | Joint<br>Disability<br>Refund |
|-----|------------------------------------|---------|--------------------------|-------------------------|--------------------------------|-------------------------------|
| 1.  |                                    |         |                          |                         |                                |                               |
| 2.  |                                    |         |                          |                         |                                |                               |
| 3.  |                                    |         |                          |                         |                                |                               |
| 4.  |                                    |         |                          |                         |                                |                               |
| 5.  |                                    |         |                          |                         |                                |                               |
| 6.  |                                    |         |                          |                         |                                |                               |
| 7.  |                                    |         |                          |                         |                                |                               |
| 8.  |                                    |         |                          |                         |                                |                               |
| 9.  |                                    |         |                          |                         |                                |                               |
| 10. |                                    |         |                          |                         |                                |                               |
| 11. |                                    |         |                          |                         |                                |                               |
| 12. |                                    |         |                          |                         |                                |                               |
| 13. |                                    |         |                          |                         |                                |                               |
| 14. |                                    |         |                          |                         |                                |                               |
| 15. |                                    |         |                          |                         |                                |                               |
| 16. |                                    |         |                          |                         |                                |                               |
| 17. |                                    |         |                          |                         |                                |                               |
| 18. |                                    |         |                          |                         |                                |                               |
| 19. |                                    |         |                          |                         |                                |                               |
| 20. |                                    |         |                          |                         |                                |                               |
| 21. |                                    |         |                          |                         |                                |                               |
| 22. |                                    |         |                          |                         |                                |                               |
| 23. |                                    |         |                          |                         |                                |                               |
| 24. |                                    |         |                          |                         |                                |                               |
| 25. |                                    |         |                          |                         |                                |                               |
| 26. |                                    |         |                          |                         |                                |                               |
| 27. |                                    |         |                          |                         |                                |                               |
| 28. |                                    |         |                          |                         |                                |                               |
| 29. |                                    |         |                          |                         |                                |                               |
| 30. |                                    |         |                          |                         |                                |                               |
| 31. |                                    |         |                          |                         |                                |                               |
| 32. |                                    |         |                          |                         |                                |                               |
| 33. |                                    |         |                          |                         |                                |                               |
| 34. |                                    |         |                          |                         |                                |                               |
| 35. |                                    |         |                          |                         |                                |                               |
| 36. |                                    |         |                          |                         |                                |                               |
| 37. |                                    |         |                          |                         |                                |                               |
| 38. |                                    |         |                          |                         |                                |                               |
| 39. |                                    |         |                          |                         |                                |                               |
| 40. |                                    |         |                          |                         |                                |                               |
| 41. |                                    |         |                          |                         |                                |                               |
| 42. |                                    |         |                          |                         |                                |                               |
| 43. |                                    |         |                          |                         |                                |                               |
| 44. |                                    |         |                          |                         |                                |                               |
| 45. |                                    |         |                          |                         |                                |                               |
| 46. |                                    |         |                          |                         |                                |                               |
| 47. |                                    |         |                          |                         |                                |                               |
| 48. |                                    |         |                          |                         |                                |                               |
| 50. |                                    |         |                          |                         |                                |                               |
| 51. |                                    |         |                          |                         |                                |                               |
| 52. |                                    |         |                          |                         |                                |                               |
|     | Total Gross Refund Premium         |         |                          |                         |                                |                               |