



P.O. Box 2447  
Thomasville, GA 31799-2447  
877-777-8808  
www.SeniorLifeInsuranceCompany.com

### PREMIUM RECEIPT

**All premium checks must be made payable to Senior Life Insurance Company.  
Do not make checks payable to the agent or leave the payee blank.**

Proposed Insured: \_\_\_\_\_

Payment Amount Received: \_\_\_\_\_

Plan Type Applied For: \_\_\_\_\_

Application Date: \_\_\_\_\_

This receipt is executed in connection with the above referenced application made to Senior Life Insurance Company [the Company] for the above referenced payment. Insurance under the terms of the policy applied for in the above referenced application shall not become effective unless:

- a) The Proposed Insured's health remains as described in the application; and
- b) The first premium is paid and honored by the bank upon first presentation; and
- c) The Policy is issued by the Company.

Otherwise, there shall be no liability on the part of the Company except to refund this payment.



\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
License Number

\_\_\_\_\_  
Date