IMPORTANT NOTICE REGARDING REPLACEMENT OF LIFE INSURANCE

Our agent is recommending that you purchase a life insurance policy from the Insurer indicated on this form. In connection with this purchase, you have indicated, either as a result of his recommendation or at your own initiative, that you may terminate or change an existing life insurance policy or that you may obtain a loan against your policy to pay premiums on the proposed policy. Any of these actions is a replacement of life insurance. This notice must be given to you, along with a form including information comparing the proposed policy with your existing policy to be replaced. Please read this notice and the Comparative Information form carefully.

Whether it is to your advantage to replace your existing insurance coverage, only you can decide. It is in your best interest, however, to have adequate information before a decision to replace your present coverage becomes final so that you may understand the essential features of the proposed policy and of your existing insurance coverage.

To this end, we are required to give you a Policy Summary including complete information on the proposed policy no later than when that policy is delivered to you. In addition, we will notify the insurance company that issued the existing policy in order that the company may furnish you with additional information. You may want to contact that company or its agent for further information and advice. Or, if the Insurer indicated on this form is also the issuer of the existing policy, additional information concerning the existing policy will be furnished upon request. You may want to discuss your purchase with other advisors. The information you receive will be of value to you in reaching a final decision.

If either the proposed policy or the existing insurance you intend to replace is a participating policy, you should be aware that dividends may materially reduce the cost of insurance and are an important factor to consider. Dividends, however, are not guaranteed.

You should also recognize that a policy which has been in existence for a period of time may have certain advantages to you over a new policy. If the policy coverages are basically similar, the premiums for a new policy may be higher because rates increase as your age increases. Under your existing policy, the period of time during which the company could contest the policy because of a material misstatement or omission on your application, or deny coverage for death caused by suicide, may have expired or may expire earlier than it will under the proposed policy. Your existing policy may have options which are not available under the policy being proposed to you or may not come into effect under the proposed policy until a later time during your life. Also, your proposed policy's cash values and dividends, if any, may grow more slowly initially because the company will incur the cost of issuing your new policy. On the other hand, the proposed policy may offer advantages which are more important to you.

If you are considering borrowing against your existing policy to pay the premiums on the proposed policy, you should understand that in the event of your death the amount of any unpaid loan, including unpaid interest, will be deducted from the benefits of your existing policy thereby reducing your total insurance coverage.

After we have issued your policy, you will have twenty days from the date the proposed policy is delivered to you to cancel the policy issued on your application and receive back all payments you made to us.

CAUTION: If, after studying the information made available to you, you do decide to replace the existing life insurance, you are urged not to terminate or alter your existing life insurance coverage until after you have been issued the new policy, examined it, and have found it to be acceptable to you. If you should terminate or otherwise materially alter your existing coverage and fail to qualify for the life insurance for which you have applied, you may find yourself unable to purchase other life insurance or able to purchase it only at substantially higher rates.

COMPARATIVE INFORMATION



Name of Proposed Insured	Address	Date s of Birth	
Existing Insurance	General Information Name of Company Policy Number Basic Policy Generic Name Name of Basic Policy Rider 1: Generic Name Rider 2: Generic Name Rider 3: Generic Name Issue Age Date of Issue Contestable Period Expires Suicide Clause Expires Max. Pol. Loan Interest Rate		
Premium Mode: Ins. Payable Amount of Ceases Insurance at Age \$ \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — \$ — * — * — * — * — — * — * — * — — * — * — * — * — * — * * — * * — *	Premium Data and Amounts of Insurance Basic Policy Rider 1 Rider 2 Rider 3 Accidental Death Benefit Option to Purchase Additional Insurance Waiver of Premium Benefit Disability Income Benefit	\$ S Option Ages \$ S Option Ages	Amount of Ins. Amount of Insurance at Age \$ \$ \$ \$ \$ \$ \$
\$ Guaranteed Cash Value* Dividends* \$		Guaranteed Cash Value* \$ \$ \$ \$ \$ Dividends based on current y	Dividends* \$ \$ \$ \$ \$ year's scale for*

^{*}Dividends, policy loan, and certain guaranteed cash value information concerning your existing insurance may not be known to our agent. Dividends are not guaranteed. However, they may materially reduce the cost of insurance and are an important factor to consider. Thus, if dividends or other figures have been omitted from this Comparative Information form, you should not reach a final decision to replace your existing insurance until you have them. You may obtain the omitted figures from the company that issued your existing policy. The Insurer indicated on this form will notify that company of your intent to replace your existing policy.

AGENT'S AND APPLICANT'S STATEMENTS

Primary reasons for recommending the proposed replacement of existing life insurance: The existing insurance cannot fulfill intended objectives for the following reasons: (Be specific)	Recommendations with regard to the insurance being replaced: No change	
I certify that: 1. I have provided the applicant with the Notice Regarding Replacement of Life Insurance prior to taking an application for the proposed insurance; and 2. The information in this Comparative Information form is true and correct to the best of my knowledge and belief.	I have received and read a copy of this Comparative Information form and the Replacement Notice on the reverse of this page.	
Date Signature of Agent	Date Signature of Applicant	
Agent's Address	For New Jersey residents only: I wish to receive I do not wish to receive up-to-date cost index information in a Policy Summary for my existing policy(ies)	
	Date Signature of Applicant	
First Colony Life Insurance Company P.O. Box 320 Lynchburg, VA 24505-0320	Federal Home Life Insurance Company Service Center, P.O. Box 466 Lynchburg, VA 24505-0466	
GE Life and Annuity Assurance Company P.O. Box 27601 Service Center, P.O. Box 6700 Richmond, VA 23261-7601 Lynchburg, VA 24505-6700	 General Electric Capital Assurance Company Service Center, P.O. Box 461 Lynchburg, VA 24505-0461 	

AGENT'S PROCEDURE FOR SOLICITATIONS INVOLVING REPLACEMENT OF LIFE INSURANCE

- Before taking the application, furnish the applicant with the Applicant's Copy of the signed "Important Notice Regarding Replacement of Life Insurance" and the Applicant's Copy of the completed Comparative Information form. Provide a separate Comparative Information form for each life insurance policy to be replaced and a summary which combines the data on the separate forms.
 - NOTE: A. If there is no policy number, use a receipt number or other alternative means of identification.
 - B. If the premium and/or amount of insurance is not level, show the manner in which it changes. Attach a schedule, if necessary.
 - C. If the rider premium cannot be separated from the premium for the basic policy, write "Included in Basic Policy Premium."
- 2. Leave a copy of each sales proposal with the Applicant.
- 3. Send to the replacing insurer with the application the Company Copy of the "Important Notice Regarding Replacement of Life Insurance," the Company Copy of the Comparative Information form, and a copy of each sales proposal used in the solicitation.