

Use this form as a side-by-side comparison of the replaced policy to the proposed MassMutual policy.

A Policy Information

1. Policy owner full legal name (First, MI, Last, Suffix): _____
2. Date (mm/dd/yyyy): _____
3. Agent name: _____
4. Firm number: _____
5. Replaced company name: _____
6. Replaced policy number(s): _____

B Policy Comparison

Focus your comparison on the differences between the two policies in terms of premiums, death benefit, premium payment periods, proposed underwriting class, and cash values. If replacing multiple policies, include the aggregate cash values, premiums and death benefits amounts in the Replaced Policy columns. While Reg. 60 asks for this information for current, 5 and 10 years, please show values 5, 10, 20 and 30 years hence. For premiums, if illustrating shorter than the pay period, indicate so in the Illustrated Outlay section.

Proposed MassMutual Policy

Cash Value in year:	Guaranteed	Non-Guaranteed
5	\$	\$
10	\$	\$
20	\$	\$
30	\$	\$

Death Benefit in year:	Guaranteed	Non-Guaranteed
5	\$	\$
10	\$	\$
20	\$	\$
30	\$	\$

Cumulative Premium in year:	Required	Illustrated Outlay
5	\$	\$
10	\$	\$
20	\$	\$
30	\$	\$

Underwriting Class

Replaced Policy/Policies (Aggregate)

Cash Value in year:	Guaranteed	Non-Guaranteed	Insured's Age
5	\$	\$	
10	\$	\$	
20	\$	\$	
30	\$	\$	

Death Benefit in year:	Guaranteed	Non-Guaranteed	Insured's Age
5	\$	\$	
10	\$	\$	
20	\$	\$	
30	\$	\$	

Cumulative Premium in year:	Required	Illustrated Outlay	Insured's Age
5	\$	\$	
10	\$	\$	
20	\$	\$	
30	\$	\$	

Underwriting Class