

EXHIBIT 14

Heritage Union Life Insurance Company

PO Box 1147, Jacksonville, IL 62651-1147
Phone 800-825-0003 Fax 803-333-7842
Visit us at www.insurance-servicing.com

August 3, 2011

SIMON BERNSTEIN
7020 LIONS HEAD
BOCA RATON, FL 33496

Insured Name: SIMON BERNSTEIN
Policy Number: 1009208
Correspondence Number: 09445909

Dear SIMON BERNSTEIN:

We are writing to inform you that your reinstatement application has been approved.

- Your policy has been fully reinstated.
- In order to complete the reinstatement process, your payment of \$ must be received by the Company at the address shown above during the lifetime of the insured and within 30 days from the date of this letter. Your policy will remain terminated until the requested premium payment is received in our office. If payment is not received as indicated above, your reinstatement approval will be considered void, and a new reinstatement application will be required.
- Enclosed is a copy of your completed Policy Owner Plan Change/Reinstatement Application for your records.

PLEASE PLACE THIS COPY WITH YOUR INSURANCE RECORDS FOR FUTURE REFERENCE.

If you have any questions, please call the Client Service Center at 800-825-0003, Monday through Friday from 7:30 AM to 4:30 PM Central Standard Time.

Sincerely,

Client Services