CODE OF ETHICS AND CONDUCT Life Insurance Association of Malaysia **DECLARATION OF OBSERVANCE** I *Mr/Ms _____ (name) bearer of NRIC No.: being an *employee/intermediary of hereby (company) declare and confirm that I have read and understood the contents of the Code of Ethics and Conduct which are applicable to me, and further declare that I shall comply and abide by the rules contained therein. (Signature): (Designation): (Date): * delete as necessary

Please return this copy to your Company.