

frequently the applicant refuses it altogether. This is not always the case, however, and the agent whose client is liened or rated up should always make a resolute effort to get him to accept the policy. It sometimes happens that the very fact of his failure to pass the medical examination has the effect of making the candidate more than ever anxious to obtain insurance. A client may have been lukewarm on the subject when the agent was making the canvass, but if the medical examination discloses the fact that he has an intermittent heart or some other trouble, it may serve to awaken him to the importance of obtaining insurance even on less favourable terms. If the agent is tactful and persistent, the unfavourable action of the medical committee need not mean the loss of a policy.

The cases where an extra premium is imposed are, of course, the most difficult to deal with. There is a straight addition to the annual cost of the insurance—a fact which cannot be explained away or got around by any amount of talking. The best course is probably to refer the increased premium to the equivalent rated up age. Thus, if a man aged 20 is accepted on 20 payment life plan, subject to an extra premium of \$5, he will have to pay \$32.45 per annum instead of \$27.45, the quoted premium at age 20. But \$32.45 is rather less than the premium corresponding to age 29. So that our client, although he has to pay more for his policy than he expected to pay, is still getting his insurance on cheaper terms than thousands of other men a few years older who are in perfect health and have A1 family histories. Moreover, as shown by the accompanying table, the amount payable by the company is far larger than the amount of the increased premiums. If the assured dies after having paid the