



Dear Sir / Madam,

18.11.2023

Reg : Link-K Monthly Bulletin - November 2023

The much awaited major reforms in the insurance sector might face further delays, as sources suggest that the path breaking insurance Bill 2023 is unlikely to be passed in the ongoing monsoon session of parliament. The government has not tabled the bill, which means key proposals, such as composite licensing, differential capital, reduced solvency norms, and the issuance of captive licenses, will remain on hold.

According to the proposed amendments, the minimum paid up capital requirements for starting general, life, or standalone health insurance businesses would be determined by IRDAI based on the size and scale of operations, class or subclass of insurance business, and the category or type of insurer. This could result in changes to the existing paid-up capital requirements of Rs. 100 crore for general, life or standalone health insurance businesses and Rs. 200 crore for reinsurance businesses.

The proposal for a composite license would enable an applicant to undertake any type of insurance business, allowing insurers to operate in both life and non-life sectors under a single entity. Similarly, a captive insurance company would empower business groups to establish wholly owned subsidiary insurers to provide risk mitigation services for their parent companies or related entities.

Frauds in insurance industry in India is not new, it has been a part and parcel of the industry. According to a research, the insurance sector in India loses Rs. 30,401 crore of rupees every year due to frauds!

According to Deloitte's insurance Frauds Survey 2023, there have been more cases of fraud against insurance companies in India involving life and health insurance. "An interesting insight from the survey pointed to the weakness in controls to prevent and / or detect frauds as one of the reasons for increased fraud incidents. A weakening of controls over time may have been caused by the introduction of new technology and changes in working methods, particularly in light of the pandemic. This gives fraudsters a chance to take advantage of the systems' flaws.

This amount of fraud is mind boggling. Have our insurance Regulators, Insurance Companies have thought of what can we achieve from this amount lost to fraud.

Happy reading

Thanking you for the opportunity given to serve you,

Yours faithfully
For Link-K Insurance Broker Co. (Pvt.) Ltd

V.P. Mohankumar
Principal Officer and Managing Director

“ Getting insurance is Your responsibility
to your family and loved ones.
You April hate is but is your responsibility.



LIFE**1**

- LIC net profit jumps to Rs. 9,543 crore in Q1
- LIC's know on effect : Insurer's new business premium drops 12.6%
- SBI Life Registers Rs. 777 crore profit in Q4

NON-LIFE INSURANCE**2**

- Health Insurance segment to Cross Rs. 1 trillion mark in FY 24.
- Cattle insurance scheme in Rajasthan to benefit 2 million rearers
- New India Assurance loses tag of A-I's "lead insurer" to Tata AIG General Insurance
- Medical insurance premiums surge 10 - 25% due to rising costs, demand

KNOW AN INSURANCE PRODUCT**3**

- Side A cover Directors and Officers liability insurance

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- Rs. 1.78 trillion spent on rail safety in 9 years
- Claims settlement in PMFBY to ease with timely subsidy deposit
- PSU insurers review plans of captive health TPA
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LIFE INSURANCE



LIC net profit jumps to Rs. 9,543 crore in Q1

LIC has reported a standalone net profit at Rs. 9,543.71 crore for the quarter ended June as against a profit of Rs. 682.88 crore in the corresponding quarter of 1st year, a rise of 1,297 per cent.

However, the net premium income of LIC was almost flat at Rs. 98,362.75 crores as compared to Rs. 98,351.76 crore in the same period of last year. However, sequentially, the net profit declined 29 per cent from Rs. 13,428 crore reported in the March quarter. The net premium income dipped 25 percent quarter on quarter.

The income from investment of LIC, the largest investor in the stock markets, rose 29.80 percent to Rs. 90,309 crore in the quarter under review, compared with Rs. 69,571 crore in the same quarter of last fiscal.

Siddhartha Mohanty, Chairpersons, LIC, said "Over overall expense ratio has become better and our margins are stable on year on year basis.

LIC's know on effect : Insurer's new business premium drops 12.6%

The new business premium (NBP) of life insurance companies dropped 12.62 per cent year on year in March 2023 due to an over 30 per cent drop in Life Insurance Corporation (LIC) of India's premiums, albeit on a high base.

Data released by the Life Insurance Council shows the industry racked up NBP of Rs. 52,081 crore in March 2023, compared with Rs. 59,608.98 crore in the year - ago period.

NBP is the premium acquired from new policies in a year. It is the sum of the first year premium and single premium, reflecting the total premium received from new businesses.

SBI Life Registers Rs. 777 crore profit in Q4 :

SBI Life Insurance company has declared a net profit of Rs. 777 crore for the fourth quarter of the fiscal year 2022-23, which is 15 per cent higher against Rs. 672 crore clocked in the year ago period.





NON-LIFE INSURANCE



Health Insurance segment to Cross Rs. 1 trillion mark in FY 24.

The health insurance segment is on track to cross the Rs. 1 trillion mark during the current fiscal year as the total premium already crossed Rs. 90,000 crore in the previous fiscal.

Total premium rose to Rs. 90,667.7 crore in the last fiscal, from Rs. 73,598 crore in FY 22. Total health premium had stood at Rs. 58,684.2 crore in FY 21, according to CareEdge Ratings.

CareEdge, in a note, said health insurance premiums have been the primary growth lever of the non-life insurance industry. This has resulted in the segment increasing its market share from 29.5 from FY 21 to 35.3% for FY 23. The health segment has grown by 23.2% for FY 23, which is lower than the growth of 25.4% witnessed for FY 22, the rating agency said.

Cattle insurance scheme in Rajasthan to benefit 2 million rearers:

Looking at the importance of animal husbandry in the economy of Rajasthan, the State government is providing schemes, including recently launched insurance cover for milch cattle.

In inflation relief camps, or "Mehangai Rahat" camps a scheme of Rajasthan government, launched recently and alter to continue till June 30, those in cattle rearing are being provided insurance cover of Rs. 40,000 each for two milch cows under the Mukhyamantri Kamdhenu Pashu Bima Yojana.

According to the scheme, Rs. 750 crore would ne spent a year and more than 2 million cattle rearers would benefit from it. The scheme is free for rearers with an annual income up to Rs. 8 lakh

a year, while those earning more have to pay Rs. 200 per animal per annum.

New India Assurance loses tag of A-I's "lead insurer" to Tata AIG General Insurance:

After the Tata Group's takeover of Air India, New India Assurance has lost its tag of the airline's "lead insurer" to a firm from the conglomerate.

New India Assurance had been the lead insurer for the account of Air India for decades. It lost the tag to Tata AIG General Insurance - for the first time - during the recent renewal of Air India's cover for 2023-24, despite significant hardening of the international reinsurance market.

Medical insurance premiums surge 10 - 25% due to rising costs, demand:

Premiums of medical insurance policies have risen 1025 per cent over the last year, lead by medical inflation, technological innovation, and increased awareness of healthcare facilities.

The increase by standalone health insurers has been much higher at 1520 per cent, whereas for general insurance companies it has been slightly lower at 1015 per cent due to their relatively diversified portfolios, said industry players.

The cost of healthcare services has increased year on year, driven by technology enhancements and other costs such as medicines, medical treatments, and procedures due to inflation. Medical inflation in India is around 15 per cent against CPI inflation of 6 per cent, which has increased the costs of claims significantly for insurance companies, said Parthanil Ghosh, President, Retail Business HDFC Ergo General.



Side A cover Directors and Officers liability insurance :

Directors and Officers (D&O) insurance is a policy that provides protection to Directors, Officers and employees of a company from claims which may arise due to actual or alleged breach of duty in their managerial capacity. The policy covers the legal fees other costs the organization may incur in defending such individuals against lawsuits.

The policy framework includes coverage as per below :

Side A : Side A coverage covers directors, officers and employees for claims where their organization refuses to or is financially unable to cover them.

Side B: Side B coverage provides protection on behalf of the organization for losses that are indemnified resulting from a claim against the directors, officers and employees.

Side C : Side C coverage pays on behalf of the organisation a loss that results from a claim against the company.

Understanding Side A DIC coverage:

Side A DIC coverage can be triggered in the following circumstances :

- The organization becomes bankrupt.
- The organization is prohibited from indemnifying its directors, officers and employees.
- Criminal acts committed by directors, officers and employees.
- Regulatory investigations against above mentioned

insured persons.

Traditional D & O policies already have a Side A cover but a separate Side A DIC policy provides excess limit coverage. It provides broader coverage for losses and damages. It includes cover for investigations at the informal stage, pre claim enquiries, penalties against insured persons and costs incurred for producing documents. The policy can provide automatic coverage to directors and officers of subsidiary companies.

The policy also provides an absolute carve back for defence costs within the fraud / conduct exclusion. Most of the traditional D&O policies recover the defense costs from individual directors and officers following a court order proving them guilty. However the Side A DIC policies do not attempt to recoup such costs. This further strengthens the directors and officers in cases involving allegations of intentional acts.

The Side a DIC policy does not sit on the risk of exhaustion by corporate reimbursement claims, this policy always ensures a pool of funds is available for directors and officers for their personal assets that concern them the most.

Hence it is very important to have a well drafted D&O program in place which includes cover for the Side A DIC policy to protect directors and officers in this increasingly complex legal environment in which they operate/ A well structured program is also critical to attract top managerial talent considering the gravity of the risks involved.





Odisha Tragedy : Only 30% opted for worlds cheapest travel insurance :

With only a small number of passengers of two ill-fated trains involved in the June 2 Odisha tragedy seems to have opted for the Rs. 10 lakhs insurance cover by paying just Re. 035 paise and now it is time for the Centre to bundle the cover with all the tickets booked through the Indian Railway Catering and Tourism corporation Ltd's (IRCTC) online portal, said insurance professionals.

As per the initial indications, only a small number of passengers of the two passenger trains have opted for the travel accident insurance cover while booking through the IRCTC portal. As per data available, SBI General has covered 351 passengers.

The policy covers death / disabilities / medical expenses due to a train accident during the travel.

Rs. 1.78 trillion spent on rail safety in 9 years :

Even as the Balasore train accident has brought back focus on increased spending to ensure safety related budget of the government for past nine year shows that the national transporter has been consistently upgrading its operations with technologies that significantly lowers the changes of any accidents.

In the nine year period, Indian Railways spent a staggering Rs. 1,78,012 crore on rail safety (including budget estimate for FY 24) at an average annual spend on Rs. 17,801 crore. This is 2.5 times the safety spend on Railways prior to 2014 when between 2004-2005 and 2013-14, about Rs. 70,000 crore was spent of rail safety at an annual expense of Rs. 7,027 crore.

Claims settlement in PMFBY to ease with timely subsidy deposit :

The Centre announced the delinking of its premium share with States' contribution under crop insurance scheme for faster claims settlement as framers were suffering despite paying their share of premium at the time of enrollment.

Under the Prime Minister Fasal Bima Yojana (PMFBY), farmers pay a nominal 2 per cent of the sum insured as premium in kharif season and 1.5 per cent in rabi and 5 per cent for cash crops in both seasons. The remaining premium amount, derived after tender for different crops in different clusters, is shared at 50 : 50 by Centre and States.

Addressing an event to launch separate portal and mobile APP, Agriculture Minister Narendra Singh Tomar said that farmers were without their fault waiting for claims payment for a long time despite paying their share of premium. Now we have decided that Centre will pay its share in time, even if there is delay by States, so that claims can be settled, either fully or

partially, Tomer said.

PSU insurers review plans of captive health TPA :

Public Sector insurers are relooking at their investment in Health Insurance TPA of India, a captive services company, for its inability to meet objectives.

Sources said a committee comprising former Oriental Insurance Chairman Anjan Dey and other PSU officials has been set up to submit a road map. HITPA was incorporated in 2013 in Delhi with two key objectives to enhance customer experience and increase efficiency in the PSU's health insurance claims processing. A corollary benefit would be reduce the bleeding in the health insurance portfolio of public sector insurers.

HITPA is a joint venture of five public sector insurance companies - National Insurance, Oriental Insurance, New India Assurance, United India Insurance, and GIC of India, PSU insurers had put Rs. 120 crore into the TPA, which went into building up the necessary infrastructure.

Under PMKAY, Rs. 6.9 crore paid for treatment of "dead" patients : CAG

Flagging irregularities in the audit of the Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (PMJAY) health insurance scheme, the comptroller and Auditor General of India (CAG) has said that Rs. 6.97 crore was paid for the treatment of 3,446 patients who had previously been declared dead in the database.

In the performance audit, under the head "Treatment of a beneficiary shown as "died" during earlier claim / treatment", the CAG noted that "patients earlier shown as "Died" in TMS (the Transaction Management system of the scheme) continued to avail treatment under the scheme.

Common cashless network for all hospitals may be in place by January :

The majority of 5,000 odd hospitals in the country may soon come under a common network for cashless health insurance facilities. The general insurance council is working with hospitals and all the 20 non life insurance companies (general and stand-alone health) for on platform. This could be ready by December / January 2024.

Now, only the four PSU general insurance companies have their separate networks. If the common network is rolled out, then the majority of the health insurance customers will not have to pay a huge amount to hospitals and wait for reimbursement. At present, customers have to settle bills for non - network hospitals and wait for reimbursement because different insurance companies have different lists of hospitals.

Interesting historical Maritime Fraud in the year 1781

On August 1781, a British slave ship, s. Zong (110 tons square stern ship: Registered at Liverpool, UK, ship's hull and cargo insured hyu Lloyds of London) left Ghana with 442 slaves (cargo) abroad - twice the number it was designed to carry bound for Jamaica. When it reached the Black river in Jamaica on December 22, 1781; only 208 slaves remained to be sold. The rest of the 132 captive slaves were brutally murdered by the crew of the ship.

The marine insurance industry was not stranger to fraudulent claims at that time. When an insured ship owner decodes deliberately and unlawfully to wreck his own vessel or his cargo, one can be sure that the money and stakes involved are pretty high. The added benefit however, is that if all goes according to the plan, all the physical evidence can be easily buried off in the depths of the ocean floor.

The Zong was an unlucky ship on an unlucky voyage. It has an inexperienced captain - Luke Collingwood, a surgeon by trade who had never commanded a slave vessel. It also had a small and quarrelsome crew, who were at loggerheads with each other by the time that the Zong had reached the Caribbean after an unusually long Atlantic crossing. First, after leaving St. Kitts in mid November 1781 the crew discovered that their water barrels were leaking, meaning that water supplies became short buy the time that the ship neared Jamaica (though no sailor or captive was put on short allowance). Second, someone made the disastrous decision of mistaking the western end of Jamaica for Cape Tiburon in astern Saint - Domingue. This navigational error meant that by 29 November 1781 the Zong was hopelessly off-course, becalmed somewhere off the south west of Jamaica, far away from its intended landing point of Kingston.

Adrift, with water running low and fearing slave insurrection the crew consulted and decided to force overboard African captives to preserve water for survivors. They killed the Africans in three batches - 54 were killed on 29 November; 42 were murdered on 1 December, and sometime in early December (and after rain had fallen, making the problem of dwindling water supplies less acute) a further 26 were thrown overboard. On the final occasion, ten slaves leapt into the sea, committing suicide rather than being murdered. The Zong finally arrived in Black River, southwest Jamaica, on 22 December 1781, where it sold its remaining 208 slaves.

The ship (renamed the Richard) returned to England on 26 October 1782 and the owners, the Gregson syndicate, claimed the losses of the murdered slaves at Euro 30 per head, under an insurance contract that covered the death of slaves abroad slavers due to "the perils of the sea" and which was based upon the average cost of the surviving 208 Africans

sold into slavery at Black River in January 1782.

Upon the Zong's arrival in Jamaica, James Gregson, the ship's owner, filed an insurance claim for their loss. Gregson argued that eh Zong had 420 gallons of water abroad when she was inventoried in Jamaica. Despite this the Jamaican court in 1782 found in favour of the owners.

A jury head the dispute, Gregson v/s. Gilbert, at London's Guildhall in March 1783 and ruled in favour of the ship owners. The insurers appealed, as solicitor Andrew Bicknell notes, not on the basis of the common humanity, but because it occurred as a result of errors of navigation and mismanagement of the vessel, namely insufficient water onboard.

The crux of the plaintiffs' case was that the crew was under the "necessity" of throwing slaves overboard because they faced an imminent insurrection from water deprived captives realizing they were facing a slow and painful death. There was no insurrection of the Zong. But the crew were convinced that if they had not acted on 29 November an insurrection would have occurred. Killing 54 women and children by jettisoning them as cargo saved the crew and the rest of the slaves in ship from imminent destruction.

Both James Kelsall and Robert Stubbs, the only eye - witness testimony that exists concerning the decision making process on the night of 29 November, were insistent on this point. Stubbs supported Collingwood's decision to murder Africans because "according to his judgement the Captain did what was right. There was an absolute necessity for throwing over the Negroes. Kelsall claimed and added that he objected at first but soon came around.

Was an insurrection likely? The jury at the jury trail on March 05, 1783 thought so. They awarded the Gregson syndicate Euro 3,660 for the loss of 122 Africans insured at Euro 30.

It wasn't until 50 years later that the Slavery Abolition Act 1833 abolished slavery in most British colonies, and the League of Nations 1926 Slavery Convention sought global prohibition of slavery and the slave trade.

In 1794 the Salve Trade Act was amended to limit the way insurers could underwrite slave voyages, making the "perils of the sea" and other general phrases illegal. Finally, in 1807, Parliament made it illegal for any British ship to carry slaves and for British insurers to underwrite slaving voyages.



died on 08.06.2014 due to accidental drowning in the river. After his death, the insurer paid only Rs. 2,35,000 against the sum assured but denied the accident cover on the ground that the insured was under the influence of alcohol (drunk) at the time of the accident. The insurance company claimed that being drunk at the time of the accident was a violation of condition no. 10 (b)(i) of the policy.

The complainant approached the District Forum, which held that "it has not been conclusively proved that the deceased was under the influence of alcohol. From the post mortem (PM) the District Forum also observed that the death of the insured was due to "asphyxia" and "wet drowning" and not due to "intoxication".

While the Forensic Science Laboratory report showed the presence of 59.45 mg% ethyl alcohol in the blood of the deceased, the District Forum found the claim inconclusive as no urine sample was taken during the post mortem examination. Therefore, the Forum observed, "it cannot be said that the deceased was under the influence of alcohol.

The District Forum allowed the complaint and directed the insurance company to pay Rs. 2.35 lakh to be complainant with 9% per annum interest from the date of complaint till payment. It also directed the company to pay Rs. 25,000 to the complainant as compensation for mental harassment etc. and Rs. 5,000 towards litigation charges.

However, the insurer challenged the District Forum's order in the State Forum, which allowed the appeal and set aside the previous order in favour of the insurance company. Following this, the complainant approached the NCDRC.

The NCDRC also noted that there was not evidence to prove that the "stomach contents has smell of alcohol and whether blood and urine samples of the deceased were collected or not.

Even if it is assumed that 59.45 mg% ethyl alcohol was present in the blood of the deceased at the time of death, the national panel found it was not enough to say that the person was intoxicated to be out of his senses or with reflexes impaired.

The NCDRC quoted AIIMC Manual for Physicians in National Drug Dependence Treatment Centre. According to this manual, blood alcohol concentration (BAC) of less than or equal to 80 mg / dl would have effects like "Euphoria, feeling of relaxation and talking freely, clumsy movement of hands and legs, reduced alertness but believes himself to be alert.

Thus, on the one hand, there are material lapses and errors apropos the PM and the FSL reports and on the other hand even if BAC level 59.45 mg% is taken on its face the same is far less to say that the human was under the influence of alcohol as to be intoxicated beyond his senses or with reflexes impaired, the NCDRC order noted.

While allowing the revision petition NCDRC said, in our considered view, the insurance co. mechanically repudiated the accident benefit claim by taking recourse to its said condition no. 10 (b) (i) in the routine without examining the relevant and material documents with the due and requisite application of mind, its act is neither correct nor justifiable.

Insurance co has to pay accident victim even if driver's license has expired : HC:

An insurance company is liable to pay compensation to the accident victim's kin even if the driving license of the offending vehicle's driver has expired and not renewed, as an expired license would not make him an unskilled driver, the Bombay High court has said.

The courts was hearing a petition filed by the family members of the deceased woman challenging an order passed by the Motor Accidents Claims Tribunal exonerating the insurance company from paying compensation as the driving license of the driver of the offending vehicle has expired.

Accident insurance claim denied due to death under influence of alcohol, NCDRC reverses order:

In an interesting case, the National Consumer Disputes Redressal Commission (NCDRC) recently reversed a decision that denied accidental insurance cover to a complainant after the death of his son due to drowning. The claims was denied by the insurance company on the ground that the deceased was under the influence of alcohol at the time of death.

As per the NCDRC order dated 14th September 2022, the complainant's so had purchased LIC JeevanAnand policy with profits and with accident benefits. The risk covered as Rs. 4,70,000 (Rs. 2,35,000 on account of the sum assured and Rs. 2,35,000 on account of accident benefit). The insured person



CLAIM - SERVICED BY LINK-K

Group Personal Accident / Janata Personal Accident Claim:

We were informed by one of our client about the accidental death of an employee covered under both Group Personal accident policy as well as Janata Personal accident policy for a Sum Insured of Rs.5,00,000/- and Rs.1,00,000/- respectively. This accident was unique in nature, since, the accident happened in a public road when they were going Padhayathra (walking by foot) to Palani temple. We received the intimation only 7 days after the incident. Insurer arranged for an investigation by appointing an investigator a retired Deputy Superintendent of Police.

The cause of accident was when a group of people were going on a Pilgrimage by foot to Palani temple and on the way one person accidentally fall into the canal and the deceased employee in an attempt to save the other person also drowned resulting in his death. We proceeded with the claim by asking the client to submit the required documents and guided them for procuring the same.

Our client submitted all the relevant documents such as completed claim form, Copy of FIR, Post Mortem certificate, Death certificate and Legal heir certificate etc., In the post mortem certificate it was mentioned that the cause of death was pending for opinion and reserved for pending of chemical analysis. Due to this remarks insurer was hesistant in settling the claim.

MD of Link-K Insurance Broker Co Pvt Ltd along with the HR of the insured visited the Palladam Police station and Government Hospital and guided them in obtaining the required certificates.

The final opinion was obtained from the Government Hospital, Palladam, mentioning that the specimen sample analysis showed that there was no poison detected and confirmed the death due to drowning. Investigator report

also supported the cause of accident is due to drowning.

As instructed by our client the amount of Rs.6,00,000/- for both the claims were settled to the legal heir directly by the Insurer.

MARINE CLAIMS

1.A lorry carrying cotton bales to a textile mill in Sirumugai from North India got fired near Salem on 26.05.2023

2.Similar type of accident happened to another mill in Dindigul near Karur on 22.06.2023

The first accident was due to a Gas cylinder burst inside the driver cabin while cooking.

The second accident happened due to a HT cable got loosened and rubbed the cotton bales.

In both the cases it was total loss of cotton bales involving over Rs. 45 Lakhs approx.

No sooner the accidents were reported to us we lost no time in coordinating with the Insurers (two different companies) and arranging for survey. All the relevant documents such as claim form, Policy copy, LR , copy of Invoice, copy of RC , DL, FIR and Fire Service Report etc., were submitted to the Insurer for processing of the claims. Both claims were settled within a period of three months from the date of loss, invoice value + 10% (on agreed value as per marine policy terms) that was well over Rs. 45 lakhs each.

It will not be out of place to mention that these two claims were settled by the Insurers due to the untiring efforts and coordination of the LINK Team at every stage and cooperation of our client and the Insurer.

We have visited the accident spot, Police Station and Fire Service to get FIR and Fire service report etc.

★ LIGHTER ★

MOMENTS



Good for Laughs !

Today I donated my watch, phone and Rs.500 to a poor guy. You don't know the happiness I felt as I saw him put his knife back in his pocket.

I miss times when I was working at the zoo. My boss fired me just because I left the lion's gate open. I mean who would steal a lion?

*I was in a cab today and the cab driver said, "I love my job, I'm my own boss. Nobody tells me what to do." Then I said, "turn left".

*Why do supermarkets make the sick walk all the way to the back of the store to get to the Pharmacy for their prescriptions while healthy people can buy cigarettes at the front?

*Why do people order double cheeseburgers, large fries, and yet get a diet coke?

Why do banks leave vault doors open and then chain the pens on the counter tops?

Why do we leave cars worth thousands of dollars in our driveways and put our useless junk in the garage?

Why does the sun lighten our hair, but darkens our skin?

why can't women put on mascara with their mouth closed?

Why is '*abbreviated'* such a long word?

Why is it that doctors and attorneys call what they do '*practice'?*

Why is lemon juice made with artificial flavoring, and dish washing liquid made with real lemons?

Why is the man who invests all your money called a broker?

Why is the time of day with the slowest traffic called the '*rush hour'?*

Why do they sterilize the needle for lethal injections?

You know that indestructible black box that is used on airplanes? *Why don't they make the whole plane out of that stuff??*

Why don't sheep shrink when it rains, whereas Sweaters of Wool, do?

Why are they called apartments *when they are all stuck together?*

If flying is so safe, *why do they call the airport the terminal?*

We all need to smile every once in a while.

A Day Without Laughter is a *DAY Wasted !*



ONLY 8% LIVE > 65

Whoever has written / compiled this, hats off to the guy !
Read and understand how lucky we are !!

The current population of Earth is around 7.8 Billion.

For most people, it is a large figure, that is all.

However, someone has condensed the 7.8 billion in the world into 100 persons,

and then into various percentage statistics.

The resulting analysis is relatively much easier to comprehend.

Out of 100:

11 are in Europe

5 are in North America

9 are in South America

15 are in Africa

60 are in Asia

49 live in the countryside

51 live in towns/ cities

77 have their own houses

23 have no place to live.

21 are over-nourished

63 can eat full

15 are under-nourished

1 ate the last meal, but did not make it to the next meal.

The daily cost of living for 48 is less than US\$2.

87 have clean drinking water

13 either lack clean drinking water or have access to a water source that is polluted.

75 have mobile phones

25 do not.

30 have internet access

70 do not have conditions to go online

7 received university education

93 did not attend college.

83 can read

17 are illiterate.

33 are Christians

22 are Muslims

14 are Hindus

7 are Buddhists

12 are other religions

12 have no religious beliefs.

26 live less than 14 years

66 died between 15 - 64 years of age

8 are over 65 years old.

If you have your own home,

Eat full meals & drink clean water,

Have a mobile phone,

Can surf the internet, and

have gone to college,

You are in the miniscule privileged lot.

(in the less than 7% category)

Amongst 100 persons in the world, only 8 can live or exceed the age of 65.

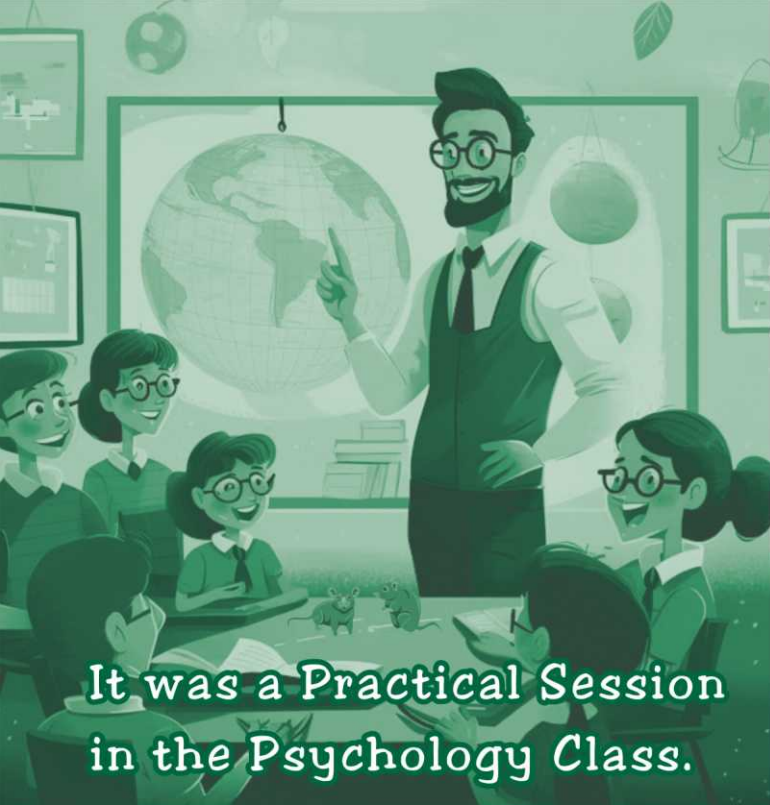
*you are over 65 years old.

Be content & grateful. Cherish life, grasp the moment.*

You did not leave this world before the age of 64 years like the 92 persons who have gone before you. You are already the blessed amongst mankind.

Take good care of your own health because nobody cares more than you yourself!

Cherish every remaining moment.



It was a Practical Session in the Psychology Class.

The Professor showed a large cage with a Male Rat in it.

The Rat was in the middle of the cage.

Then, the Professor kept a piece of Cake on one side and kept a Female Rat on the other side.

The Male Rat ran towards the Cake and ate it.

Then, the Professor changed the Cake and replaced it with some Bread.

The Male Rat ran towards the Bread.

This experiment went on with the Professor changing the Food every time.

And, every time, the Male Rat ran towards the Food item and never towards the Female Rat.

Professor said: This experiment shows that Food is the Greatest Strength and attraction.

Then, one of the Students from the back rows said:

"Sir, why don't You change the Female Rat? This one may be his Wife!"

The Professor stood straight up pointing his finger towards the Student and said "You are a Damn Genius" ??????



An 89-year-old Father of Four Sons was Dying

The sons gathered around his bed trying to make his last journey comfortable.

They tried giving him some warm milk to drink but he refused it.

One of the sons took the glass back to the kitchen and remembering a bottle of whiskey received as a gift, he opened it and poured a generous amount into the warm milk.

Back at his Father's bed, he held the glass to his lips. The old man drank a little. Then a little more. Before they knew it, he had drunk the whole glass down to the last drop.

"Dad," the son asked the father with earnest, "Please give us some advice before you die."

The old man slowly raised himself up in bed & whispered...

*"Don't sell that cow!"