SUN LIFE ASSURANCE COMPANY OF CANADA

Policyholder: Bridgeport Independent School District

Policy Number: 202577

Policy Effective Date: September 1, 2010

Policy Anniversary: September 1, 2011

This Policy is delivered in Texas and is subject to the laws of that jurisdiction. Premiums are due and payable monthly on the first day of each month. Policy anniversaries will be annual beginning on September 1, 2011.

Sun Life Assurance Company of Canada (Sun Life) agrees to pay the benefits in accordance with all provisions provided by this Policy for Employee and Dependent Accidental Death and Dismemberment Insurance. This Policy is issued in consideration of the Application of the Policyholder, a copy of which is attached, and continued payment of premiums by the Policyholder. The following pages including any Riders, Endorsements or Amendments are a part of this Policy.

For the purpose of effective dates and termination dates under this Policy, all days begin at 12:00 midnight and end at 11:59:59 pm.

Signed at Sun Life's U.S. Headquarters, One Sun Life Executive Park, Wellesley Hills, MA 02481.

Donald a. Stewart.

Chief Executive Officer

THIS IS NOT A POLICY OF WORKERS' COMPENSATION INSURANCE. THE EMPLOYER DOES NOT BECOME A SUBSCRIBER TO THE WORKERS' COMPENSATION SYSTEM BY PURCHASING THIS POLICY, AND IF THE EMPLOYER IS A NON-SUBSCRIBER, THE EMPLOYER LOSES THOSE BENEFITS WHICH WOULD OTHERWISE ACCRUE UNDER THE WORKERS' COMPENSATION LAWS. THE EMPLOYER MUST COMPLY WITH THE WORKERS' COMPENSATION LAW AS IT PERTAINS TO NON-SUBSCRIBERS AND THE REQUIRED NOTIFICATIONS THAT MUST BE FILED AND POSTED.

READ YOUR POLICY CAREFULLY

THIS IS A LIMITED POLICY -- READ YOUR POLICY CAREFULLY

THIS IS AN ACCIDENT ONLY POLICY
THIS POLICY DOES NOT PAY FOR SICKNESS

Group Accidental Death and Dismemberment Insurance Policy

Non-Participating



IMPORTANT NOTICE

To obtain information or to make a complaint:

You may call Sun Life's toll-free telephone number for information or to make a complaint at:

1-800-247-6875

You may also write to Sun Life at:

Sun Life Assurance Company of Canada Group Customer Service Center SC 1219 1 Sun Life Executive Park Wellesley Hills, MA 02481

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:

1-800-252-3439

You may write the Texas Department of Insurance P.O. Box 149104 Austin, TX 787149104 FAX# (512) 475 1771 Web: http://www.tdi.state.tx.us

E-mail: ConsumerProtection@tdi.state.tx.us

PREMIUM OR CLAIM DISPUTES:

Should you have a dispute concerning your premium or about a claim, you should contact Sun Life first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

ATTACH THIS NOTICE TO YOUR POLICY:

This notice is for information only and does not become a part or condition of the attached document.

AVISO IMPORTANTE

Para obtener informacion o para someter una queja:

Usted puede llamar al numero de telefono gratis de Sun Life's para información o para someter una queja al:

1-800-247-6875

Usted tambien puede escribir a Sun Life:

Sun Life Assurance Company of Canada Group Customer Service Center SC 1219 1 Sun Life Executive Park Wellesley Hills, MA 02481

Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de companias, coberturas, derechos o quejas al:

1-800-252-3439

Puede escribir al Departamento de Seguros de Texas

P.O. Box 149104 Austin, TX 78714-9104 FAX# (512) 475-1771

Web: http://www.tdi.state.tx.us

E-mail: ConsumerProtection@tdi.state.tx.us

DISPUTAS SOBRE PRIMAS O RECLAMOS:

Si tiene una disputa concerniente a su prima o a un reclamo, debe comunicarse con el Sun Life primero. Si no se resuelve la disputa, puede entonces comunicarse con el departmento (TDI).

UNA ESTE AVISO A SU POLIZA:

Este aviso es solo para proposito de informacion y no se convierte en parte o condicion del documento adjunto.

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Section I Schedule of Benefits

ELIGIBLE CLASSES

All Full-Time United States Employees working in the United States scheduled to work at least 20 hours per week

WAITING PERIOD

Until the first of the month coincident with or next following the date of employment

EMPLOYEE ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

CLASSIFICATION

All Eligible Employees

AMOUNT OF INSURANCE

An Employee may elect an amount of insurance in increments of \$10,000. The minimum amount that may be elected is \$10,000 and the maximum amount that may be elected is \$500,000.

An Employee's amount of Accidental Death and Dismemberment Insurance shown in the Schedule will reduce to 65% when he attains age 65, and to 50% when he attains age 70. An Employee's Accidental Death and Dismemberment Insurance terminates at the Employee's retirement.

An Employee's amount of Accidental Death and Dismemberment Insurance cannot exceed 5 times the Employee's Basic Annual Earnings.

DEPENDENT ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

Spouse 50% of the Employee's amount of Accidental Death and Dismemberment Insurance in

force.

Child* 10% of the Employee's amount of Accidental Death and Dismemberment Insurance in

force.

All amounts of Dependent Accidental Death and Dismemberment Insurance terminate at the Employee's retirement.

^{*} unmarried child under age 25.

Section I Schedule of Benefits

CONTRIBUTIONS

Employees will contribute to the cost of their Employee Accidental Death and Dismemberment and Dependent Accidental Death and Dismemberment Insurance.

INITIAL MONTHLY PREMIUM RATES

Employee Accidental Death and Dismemberment Insurance

Refer to Attachment A

Dependent Accidental Death and Dismemberment Insurance

Refer to Attachment A

The initial monthly premium rates are guaranteed for 24 months from September 1, 2010 unless otherwise specified in Section VIII, Premiums. See Section VIII, Premiums for more information.

Section II Definitions

In this section Sun Life defines some basic terms needed to understand this Policy. All male terms include the female term, unless stated otherwise.

For purposes of this Policy:

Accidental Bodily Injury means bodily harm caused solely by external, violent and accidental means which is sustained directly and independently of all other causes.

Actively at Work means that an Employee performs all the regular duties of his job for a full work day scheduled by the Employer at the Employer's normal place of business or a site where the Employer's business requires the Employee to travel.

An Employee is considered Actively at Work on any day that is not his regular scheduled work day (e.g. vacation or holiday), provided the Employee was Actively at Work on his immediately preceding scheduled work day and the Employee:

- is not hospital confined; or
- is not disabled due to an injury or sickness.

An Employee is considered Actively at Work if he usually performs the regular duties of his job at his home provided the Employee can perform all the regular duties of his job for a full work day and could do so at the Employer's normal place of business if required to do so, and the Employee:

- is not hospital confined; or
- is not disabled due to an injury or sickness.

AD&D means Accidental Death and Dismemberment.

Application means the document pertaining to the plan of insurance applied for by the Policyholder. This document is attached to this Policy.

Certificate means a written booklet prepared by Sun Life which includes any Riders, Endorsements or Amendments, containing a summary of:

- 1. the insurance benefits an Employee is entitled to;
- 2. to whom the benefits are payable; and
- 3. any limitations, exclusions or requirements that may apply.

Contributory Insurance means insurance for which the Employee is required to pay all or part of the premium.

Dependent means an Employee's:

- spouse;
- unmarried children under age 25.

An Employee's unmarried stepchild, foster child or adopted child is included as a Dependent if the child depends on the Employee for 50% or more of the child's support and is living with the Employee in a regular parent-child relationship. An Employee's unmarried grandchild is included as a Dependent if the child is a dependent of the Employee for federal income tax purposes. A child is considered adopted if in the legal custody of the Employee under an interim court order of adoption, whether or not a final adoption order is ever issued.

Section II Definitions

Dependent does not include:

- any person who is insured as an Employee; or
- any person residing outside the United States, Canada or Mexico.

If an unmarried child is:

- 1. incapable of self-sustaining employment because of mental retardation, developmental disability or physical handicap; and
- 2. dependent on the Employee for 50% or more of the child's support;

that child will continue to be a Dependent under this Policy for as long as these two conditions exist.

No person may be considered to be a Dependent of more than one Employee.

Eligibility Date means the date or dates an Employee in an Eligible Class becomes eligible for insurance under this Policy. Classes eligible for insurance are shown in Section I, Schedule of Benefits.

Employee means a person who is employed by the Employer within the United States, scheduled to work at least the number of hours shown in Section I, Schedule of Benefits, and paid regular earnings. If the Employee is working on a temporary assignment outside of the United States for a period of 12 months or less, the Employee will be deemed to be working within the United States. If the Employee is working outside for longer than 12 months or other than on a temporary assignment, the Employee will not be considered an Employee under this Policy unless Sun Life approves the Employee in writing.

Employer means Bridgeport Independent School District and includes any Subsidiary or Affiliated company named in the Application.

Grace Period means the 31 days following a premium due date.

Insured Person means the Employee or any of the Employee's insured Dependents.

Physician means an individual who is operating within the scope of his license and is either:

- 1. licensed to practice medicine and prescribe and administer drugs or to perform surgery; or
- 2. legally qualified as a medical practitioner and required to be recognized, under this Policy for insurance purposes, according to the insurance regulations of the governing jurisdiction.

The Physician cannot be the Employee, his spouse or the parents, brothers, sisters or children of the Employee or his spouse.

Policyholder means the entity to whom the Policy is issued.

U.S. Headquarters means Sun Life Assurance Company of Canada, Wellesley Hills, MA 02481.

Section II Definitions

Waiting Period means the length of time immediately before an Employee's Eligibility Date during which he must be employed in an Eligible Class. Any period of time prior to the Policy Effective Date the Employee was Actively at Work for the Employer as a full-time Employee will count towards completion of the Waiting Period. The Waiting Period is shown in Section I, Schedule of Benefits.

Section III Eligibility and Effective Dates

A. Eligible Classes

The class(es) eligible for insurance are shown in Section I, Schedule of Benefits.

B. Eligibility Date

An Employee in an Eligible Class will be eligible for insurance on the latest of the following dates:

- 1. September 1, 2010; or
- 2. the first day of the month coincident with or next following the Employee's date of employment.

An Employee in an Eligible Class will be eligible for Dependent Accidental Death and Dismemberment Insurance on the latest of the following dates:

- 1. September 1, 2010; or
- 2. the date the Employee is insured; or
- 3. the date the Employee first acquires a Dependent.

If a former Employee is rehired by the Employer within 6 months of his termination date, all past periods of employment during which the Employee was Actively at Work with the Employer will count towards completion of the Waiting Period. The Employee's Eligibility Date will be the later of the date he is rehired or the day after completion of the Waiting Period.

If a former Employee is rehired by the Employer 6 months or later after his termination date, the Employee's Eligibility Date will be the day after he completes a new Waiting Period.

C. Effective Date of Insurance

An Employee will be insured, subject to the Delayed Effective Date of Insurance, on one of the following dates:

- the Employee's Eligibility Date, if he has made a written application for insurance on or before that date; or
- the date the Employee makes a written application for insurance.

A Dependent will be insured, subject to the Delayed Effective Date of Insurance, on the latest of the following dates:

- the date the Employee is eligible for Dependent Accidental Death and Dismemberment Insurance, if the Employee has made a written application for Dependent Accidental Death and Dismemberment Insurance on or before that date; or
- the date the Employee makes a written application for Dependent Accidental Death and Dismemberment Insurance.

Delayed Effective Date of Insurance

The Effective Date of any initial, increased or additional insurance will be delayed for an Employee if he is not Actively at Work. The initial, increased or additional insurance will become effective on the date the Employee returns to an Actively at Work status.

Section III Eligibility and Effective Dates

The Effective Date of any initial, increased or additional insurance will be delayed for a Dependent if he is hospital confined. The initial, increased or additional insurance will become effective on the date the Dependent is no longer hospital confined. Hospital confined does not apply to a newborn child.

Refusal of Coverage

If an eligible Employee declines his or his Dependent's insurance, or terminates his or his Dependent's insurance in writing while continuing to be eligible, the Employee will not be eligible to re-enroll for insurance for at least 6 months.

Changes in Insurance

Changes in an Employee's amount of insurance due to a:

- change in an Employee's incremental schedule level; or
- change in an Employee's age;

will take effect immediately upon the date of change. However, any increase in insurance will be subject to the Delayed Effective Date of Insurance provision.

Employee and Dependent Accidental Death and Dismemberment Insurance

If Sun Life receives Notice and Proof of Claim that an Insured Person:

- dies from accidental drowning while insured; or
- sustains an Accidental Bodily Injury while insured, which results in loss of life, sight or limb within 365 days of the date of that injury; or
- sustains a loss of life, sight or limb within 365 days due to an accidental exposure to the elements while insured;

Sun Life will pay, subject to the Exclusions, the following percentage of Accidental Death and Dismemberment Insurance shown in Section I, Schedule of Benefits that was in force on the date of the Accidental Bodily Injury for the following losses:

Life	100%
Sight of one eye	50%
Sight of both eyes	100%
One limb	50%
More than One limb.	100%
Speech and hearing	100%
Speech or hearing	50%
Thumb and index finger of the same hand	250/
of the same hand	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%

The maximum amount of Accidental Death and Dismemberment Benefit payable for losses resulting from any one accident is 100%.

Loss of limb means severance of hand or foot at or above the wrist or ankle joint. Loss of sight, speech or hearing must be total and irrecoverable. Loss of thumb and index finger means severance through or above the metacarpophalangeal joints.

Quadriplegia means the total and permanent paralysis of both upper and lower limbs. Paraplegia means the total and permanent paralysis of both lower limbs. Hemiplegia means the total and permanent paralysis of upper and lower limbs on one side of the body.

Employee and Dependent Accidental Death and Dismemberment Insurance

Common Carrier Benefit

Sun Life will pay an additional Common Carrier Benefit if an Insured Person's loss of life occurs while traveling as a fare-paying passenger on a public conveyance operated by a common carrier. The Common Carrier Benefit is 100% of the amount of Accidental Death Benefit payable.

Seat Belt/Air Bag Benefit

Sun Life will pay an additional Seat Belt/Air Bag Benefit if an Insured Person dies as a result of an automobile accident and an Accidental Death Benefit is payable under this Policy.

Seat Belt Benefit

The Seat Belt Benefit is payable if the Insured Person was wearing a seat belt at the time of the accident. The Seat Belt Benefit is 25% of the amount of Accidental Death Benefit payable or \$25,000, whichever is less.

Sun Life must receive satisfactory written proof that the Insured Person's death resulted from an automobile accident and that the Insured Person was wearing a seat belt at the time of the accident. A copy of the police report is required.

Air Bag Benefit

The Air Bag Benefit is payable if a Seat Belt Benefit is payable and the Insured Person was positioned in a seat protected by a Supplemental Restraint System which inflated on impact. The Air Bag Benefit is 10% of the amount of Accidental Death Benefit payable or \$5,000, whichever is less.

Sun Life must receive satisfactory written proof that the Insured Person's death resulted from an automobile accident and that the Supplemental Restraint System properly inflated. A copy of the police report is required.

Seat Belt means a properly installed seat belt, lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration.

Supplemental Restraint System means a factory installed air bag which inflates for added protection to the head and chest areas.

Automobile means a motor vehicle licensed for use on public highways.

Disappearance

Sun Life will presume, subject to no objective evidence to the contrary, that an Insured Person is dead and has died as a result of an Accidental Bodily Injury if:

- 1. an Insured Person disappears as a result of an accidental wrecking, sinking or disappearance of a conveyance in which the Insured Person was known to be a passenger; and
- 2. the body of the Insured Person is not found within 365 days after the date of the conveyance's disappearance.

Employee and Dependent Accidental Death and Dismemberment Insurance

Common Accident Benefit

Sun Life will pay a Common Accident Benefit if an Employee and Dependent Spouse both die as a result of a common accident within 365 days of the date of that accident.

The Common Accident Benefit increases the Dependent Spouse death benefit to equal the Employee's amount of Accidental Death Benefit payable under this Policy or \$100,000, whichever is less.

The Common Accident Benefit is payable to an Employee's surviving Dependent Children.

Common Accident means the same accident or separate accidents occurring within a 24 hour period.

If an Accidental Death Benefit is not payable under this Policy for both the Employee and Dependent Spouse, no Common Accident Benefit is payable. If the Employee does not have a Dependent Child, no Common Accident Benefit is payable.

Repatriation Benefit

If an Accidental Death Benefit is payable and the Insured Person's loss of life occurs at least 100 miles from the Insured Person's permanent place of residence, Sun Life will reimburse the Executor or Administrator of the Insured Person's estate for the reasonable and customary expenses incurred for the preparation of the body and its transportation to the place of burial or cremation up to a maximum benefit of \$2,000. Written Proof of the expenses incurred must be submitted to Sun Life prior to payment.

Bereavement Counseling Benefit

If an Accidental Death Benefit is payable, Sun Life will pay a Bereavement Counseling Benefit during an Insured Person's Immediate Family Member's period of bereavement for up to 12 months after an Insured Person's death.

The Bereavement Counseling Benefit equals the Immediate Family Member's incurred expenses reduced by any reimbursement the Immediate Family Member receives from other sources.

The Maximum Bereavement Counseling Benefit payable is \$250 per Immediate Family Member, to a maximum of \$1,000 per Insured Person's death.

Immediate Family Member means an Employee, an Employee's spouse or an Employee's child under age 25.

Written Proof of the actual out of pocket counseling expenses incurred must be submitted to Sun Life prior to payment.

Employee and Dependent Accidental Death and Dismemberment Insurance

Exclusions

No Accidental Death or Accidental Dismemberment payment will be made for a loss which is due to or results from:

- suicide while sane or insane, or intentionally self-inflicted injuries.
- bodily or mental infirmity or disease of any kind, or infection unless due to an accidental cut or wound.
- committing or attempting to commit an assault, felony or other criminal act.
- active participation in a war (declared or undeclared) or active duty in any armed service during a time of war.
- active participation in a riot, rebellion, or insurrection.
- injury sustained from any aviation activities, other than riding as a fare-paying passenger.
- the Insured Person's voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a Physician.
- an Insured Person's operation of any motorized vehicle while intoxicated. Intoxicated means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction where the accident occurred. For the purposes of this Exclusion, "Motorized Vehicle" includes, but is not limited to, automobiles, motorcycles, boats and snowmobiles.

Employee and Dependent Accidental Death and Dismemberment Insurance

Continuity of Coverage

In order to prevent loss of coverage for an Employee when this Policy replaces a group AD&D policy the Employer had in force with another insurer immediately prior to September 1, 2010, Sun Life will provide the following coverage.

Employees not Actively at Work on September 1, 2010

An Employee may become insured under this Policy on September 1, 2010, subject to all of the following conditions:

- 1. he was insured under the prior insurer's group AD&D policy immediately prior to September 1, 2010; and
- 2. he is not Actively at Work on September 1, 2010; and
- 3. he is a member of an Eligible Class under this Policy; and
- 4. premiums for the Employee are paid up to date; and
- 5. he is not receiving or eligible to receive benefits under the prior insurer's group AD&D policy.

Any AD&D benefit payable will be the lesser of:

- the AD&D benefit payable under this Policy; or
- the AD&D benefit payable under the prior insurer's group AD&D policy had it remained in force.

All other provisions of Sun Life's Policy will apply.

Section V Termination Provisions

Termination of Employee's Insurance

An Employee will cease to be insured on the earliest of the following dates:

- 1. the date this Policy terminates.
- 2. the date the Employee is no longer in an Eligible Class.
- 3. the date the Employee's Class is no longer included for insurance.
- 4. the last day for which any required premium has been paid.
- 5. the date the Employee retires.
- 6. the date employment terminates. Ceasing to be Actively at Work will be deemed termination of employment, except the Policyholder may continue the insurance by paying the required premiums, subject to the following:
 - i. insurance may be continued for up to 1 month after the Employee has been temporarily laid off or been given an approved leave of absence.
 - ii. insurance may be continued for up to 3 months of the Employee's paid vacation.
 - iii. insurance may be continued for up to 12 months after an Employee is absent from work due to injury or sickness

The Policyholder in all of the above situations must act so as not to discriminate unfairly among Employees in similar situations.

- 7. the date the Employee requests, in writing, to have his insurance terminated.
- 8. the date the Employee ceases to be Actively at Work due to a labor dispute, including any strike, work slowdown, or lockout.
- 9. the date the Employee enters active duty in any armed service during a time of war (declared or undeclared).

While this Policy is in force, the Policyholder may continue an Employee's coverage pursuant to the Family and Medical Leave Act of 1993, as amended or continue coverage pursuant to a state required continuation period (if any).

While this Policy is in force, the Policyholder may continue an Employee's coverage pursuant to the Uniformed Services Employment and Reemployment Rights Act (USERRA).

Section V Termination Provisions

Termination of Dependent's Insurance

A Dependent will cease to be insured on the earliest of the following dates:

- 1. the date this Policy terminates.
- 2. the date the Employee ceases to be insured.
- 3. the date the Employee is no longer in an Eligible Class for Dependent Insurance.
- 4. the date the Dependent ceases to qualify as a Dependent.
- 5. the last day for which any required premium has been paid for insurance on the Dependent.
- 6. the date the Employee requests, in writing, to have his Dependent Insurance terminated.
- 7. the date the Employee dies. However an Employer may continue an Employee's Dependent Accidental Death and Dismemberment Insurance for up to 12 months after an Employee's accidental death. There will not be a premium charge for this continuation.
- 8. the date the Dependent enters active duty in any armed service during a time of war (declared or undeclared).
- 9. the date the Employee retires.

Section V Termination Provisions

Termination of Policy

This Policy will terminate for any of the following reasons:

- 1. If the Policyholder fails to pay any premium within the Grace Period, this Policy will terminate on the last day of the Grace Period.
- 2. The Policyholder may terminate this Policy by advance written notice delivered to Sun Life at least 31 days prior to the termination date. This Policy will not terminate during any period for which premium has been paid. The Policyholder will be liable to Sun Life for all premiums due and unpaid for the full period this Policy is in force.
- 3. Sun Life may terminate this Policy on any Policy Anniversary by giving written notice to the Policyholder at least 31 days in advance if:
 - a. the number of insured Employees is less than 25; or
 - b. the Policyholder fails to:
 - i. furnish promptly any information Sun Life may reasonably require; or
 - ii. perform any other obligations pertaining to this Policy.
- 4. Sun Life may terminate this Policy on any Policy Anniversary by giving written notice to the Policyholder at least 60 days in advance.

Termination of this Policy may take effect on an earlier date when both the Policyholder and Sun Life agree.

Section VI General Policy Provisions

A. Statements

All statements made in any Application are considered representations and not warranties. No representation by:

- 1. the Policyholder in applying for this Policy will render it void unless the representation is contained in the Application; or
- 2. any Employee in applying for insurance under this Policy will be used to reduce or deny a claim unless a copy of the Employee's written application for insurance is or has been given to the Employee or the Employee's beneficiary, if any.

B. Entire Contract - Policy Changes

- 1. This Policy is the entire contract. It consists of:
 - a. all of the pages of the Policy;
 - b. the attached Application of the Policyholder;
 - c. each Employee's written application for insurance (Employee retains his own copy).
- 2. This Policy may be changed in whole or in part. Only an officer of Sun Life may approve a change. The approval must be in writing and endorsed on or attached to this Policy or by an amendment to this Policy signed by both the Policyholder and Sun Life.
- 3. Any other person, including an agent, may not change this Policy or waive any part of it.

C. Employee's Certificate

Sun Life will provide a Certificate to the Policyholder for delivery to each Employee. The Certificate is intended to provide a brief explanation of the Policy benefits, but does not form a part of this Policy. If the terms of a Certificate and this Policy differ, this Policy will govern.

Section VI General Policy Provisions

D. Furnishing of Information - Access To Records

- 1. The Employer will furnish at regular intervals to Sun Life:
 - a. information relative to individuals:
 - i. who qualify to become insured;
 - ii. whose amounts of insurance change; and/or
 - iii. whose insurance terminates.
 - b. any other information about this Policy that may be reasonably required.

The records which, in the opinion of Sun Life, are material to the insurance, will be opened for inspection by Sun Life at any reasonable time.

- 2. Clerical error or omission will not:
 - a. deprive an individual of insurance;
 - b. affect an individual's amount of insurance; or
 - c. effect or continue an individual's insurance which otherwise would not be in force.

The Policyholder's or Employer's failure to report notice or proof of claim in a timely manner shall not constitute clerical error.

E. Misstatement of Facts

If relevant facts about any individual were not accurate:

- 1. an equitable adjustment of premium will be made; and
- 2. the true facts will be used to determine if and in what amount insurance is valid under this Policy.

If the amount of the benefit is dependent upon an individuals age, (as shown in Section I, Schedule of Benefits), the benefit will be the amount an individual would have been entitled to if their correct age were known.

If an adjustment results in a refund of premium, the refund will not exceed a period of more than 12 months.

F. Examination and Autopsy

Sun Life, at its own expense, has the right to have any person, whose Accidental Bodily Injury is the basis of a claim:

- 1. examined by a Physician, other health professional or vocational expert of its choice; and/or
- 2. interviewed by an authorized Sun Life representative.

This right may be used as often as reasonably required.

Sun Life has the right, in the case of death, to request an autopsy where not prohibited by law.

Section VI General Policy Provisions

G. Legal Proceedings

No legal action may start:

- 1. until 60 days after Proof of Claim has been given; nor
- 2. more than 3 years after the time Proof of Claim is required.

H. Workers' Compensation

This Policy is not in lieu of, and does not affect, any requirement for coverage by Workers' Compensation Insurance.

I. Agency

For all purposes of this Policy, the Policyholder acts on its own behalf or as an agent of the Employee. Under no circumstances will the Policyholder be deemed an agent of Sun Life.

J. Incontestability

The validity of this Policy shall not be contested, except for non-payment of premium, after it has been in force for two years from the Policy Effective Date.

Section VII Claim Provisions

A. Notice and Proof of Claim

Sun Life must receive Notice and Proof of Claim prior to any payment under this Policy.

1. Notice

for Accidental Death written notice of claim must be given to Sun Life no later than 30 days after date of death.

for Accidental Dismemberment written notice of claim must be given to Sun Life no later than 12 months after the Insured Person's date of loss.

for all other claims written notice of claim must be given to Sun Life no later than 12 months after the Insured Person's date of loss or within 12 months after the date the expense is incurred.

If notice cannot be given within the applicable time period, Sun Life must be notified as soon as it is reasonably possible.

When Sun Life has received written notice of claim, Sun Life will send the forms for proof of claim. If the forms are not received within 15 days after written notice of claim is sent, proof of claim may be sent to Sun Life without waiting for the form.

2. Proof

for Accidental Death proof of claim must be given to Sun Life no later than 90 days after date of death.

for Accidental Dismemberment proof of claim must be given to Sun Life no later than 15 months after the Insured Person's date of loss.

for all other claims proof of claim must be given to Sun Life no later than 15 months after the Insured Person's date of loss or within 15 months from the date the expense is incurred.

If it is not possible to give proof within these time limits, it must be given as soon as reasonably possible. Proof of claim may not be given later than one year after the time proof is otherwise required unless the individual is legally incompetent.

Proof of Claim must consist of:

- a description of the loss or expense;
- the date the loss or expense occurred; and
- the cause of the loss or expense.

Proof of Claim may include, but is not limited to, police accident reports, autopsy reports, laboratory results, toxicology results, hospital records, receipted bills, proof of payment (if applicable), Physician records, psychiatric records, x-rays, narrative reports, or other diagnostic testing materials as required.

Sun Life may require as part of the Proof, authorizations to obtain medical and non-medical information.

Section VII Claim Provisions

Proof must be satisfactory to Sun Life.

B. Insurer's Authority

The Plan Administrator has delegated to Sun Life its entire discretionary authority to make all final determinations regarding claims for benefits under the benefit plan insured by this Policy. This discretionary authority includes, but is not limited to, the determination of eligibility for benefits, based upon enrollment information provided by the Policyholder, and the amount of any benefits due, and to construe the terms of this Policy.

Any decision made by Sun Life in the exercise of this authority, including review of denials of benefit, is conclusive and binding on all parties. Any court reviewing Sun Life's determinations shall uphold such determination unless the claimant proves Sun Life's determinations are arbitrary and capricious.

C. Notice of Decision on Claim

A written notice of decision on a claim will be sent within a reasonable time after Sun Life receives the claim but not later than 45 days after receipt of the claim. If a decision cannot be made within 45 days after Sun Life receives the claim, Sun Life will request extensions of time as permitted under U.S. Department of Labor regulations. Any request for extension of time will specifically explain:

- 1. the standards on which entitlement to benefits is based;
- 2. the unresolved issues that prevent a decision on the claim; and
- 3. the additional information needed to resolve those issues.

If a period of time is extended because the claimant failed to provide necessary information, the period for making the benefit determination is tolled from the date Sun Life sends notice of the extension to the claimant until the date on which the claimant responds to the request for additional information. The claimant will have at least 45 days to provide the specified information.

D. Review Procedure

If all or any part of a claim is denied, the claimant may request in writing a review of the denial within 180 days after receiving notice of denial.

The claimant may submit written comments, documents, records or other information relating to the claim for benefits, and may request free of charge copies of all documents, records and other information relevant to the claimant's claim for benefits.

Sun Life will review the claim on receipt of the written request for review, and will notify the claimant of Sun Life's decision within a reasonable time but not later than 45 days after the request has been received. If an extension of time is required to process the claim, Sun Life will notify the claimant in writing of the special circumstances requiring the extension and the date by which Sun Life expects to make a determination on review. The extension cannot exceed a period of 45 days from the end of the initial review period.

If a period of time is extended because the claimant failed to provide necessary information, the period for making the decision on review is tolled from the date Sun Life sends notice of the extension to the claimant until the date on which the claimant responds to the request for additional information.

Section VII Claim Provisions

E. Time of Payment of Claims

When Sun Life receives satisfactory Proof of Claim, benefits payable under this Policy will be paid for any period for which Sun Life is liable. Payment of benefits will be made no later than 60 days after receipt of proof of Claim.

F. Payment of Claims (Unless otherwise specified in the Accidental Death and Dismemberment Benefit Section)

Benefits payable upon the death of the Employee are payable to the Beneficiary living at the time (other than the Employer). Unless otherwise specified, if more than one Beneficiary survives the Employee, all surviving Beneficiaries will share equally. If no Beneficiary is alive on the date of the Employee's death, payment will be made to the Employee's estate.

All benefits payable during the lifetime of the Employee are payable to the Employee.

If a benefit is payable to the Employee's estate, an Employee who is a minor, or an Employee who is not competent, Sun Life has the right to pay up to \$5,000 to any of the Employee's relatives whom Sun Life considers entitled. If Sun Life pays benefits in good faith to a relative, Sun Life will not have to pay those benefits again.

If a Beneficiary is a minor or is not competent, Sun Life has the right to pay up to \$1,000 to the person or institution that appears to have assumed custody and main support, until the appointed legal representative makes a formal claim. If Sun Life pays benefits in good faith to a person or institution, Sun Life will not have to pay those benefits again.

G. Change of Beneficiary

All nominations of Beneficiaries are revocable unless otherwise stated by the Employee. Any request for change of Beneficiary must be in a written form and will take effect as of the date the Employee signs and files the change with the Employer. If Sun Life has taken any action or made payment prior to receiving notice of that change, the change of Beneficiary will not affect any action or payment made by Sun Life. The consent of the Beneficiary is not required to change any Beneficiary.

H. Methods of Payment

The Death Benefit may be payable by a method other than a lump sum. The available methods of payment will be based on the benefit options offered by Sun Life at the time of election.

Section VIII Premiums

A. Premium Rates

Sun Life determines its initial or any subsequent monthly premium rate on the basis of the coverage being provided. After the initial monthly premium rate has been in effect for 24 months from September 1, 2010, Sun Life has the right to recalculate any premium rate. However, Sun Life has the right to recalculate the initial or any subsequent monthly premium rate when any of the following occurs:

- 1. the terms of this Policy are changed, including but not limited to the Schedule of Benefits; or
- 2. a new Division, Subsidiary or Affiliated Company is added to or deleted from this Policy; or
- 3. the number of Employees insured changes by 25% or more from the number of Employees insured on the Policy Effective Date or the immediately preceding Policy Anniversary Date; or
- 4. one or more class(es) are added to or deleted from this Policy.

No premium rate may be increased unless Sun Life notifies the Policyholder at least 60 days in advance of the increase. Premium rate increases may take effect on an earlier date when both Sun Life and the Policyholder agree.

B. Payment of Premiums

- 1. All premiums due under this Policy, including adjustments, if any, are payable by the Policyholder on or before the respective due dates at Sun Life's U.S. Headquarters or at another location designated by Sun Life. The due dates are specified on the first page of this Policy.
- 2. The premiums due under this Policy on each premium due date are based upon the premium rates in effect for the benefit provided. The premium due is the sum of the monthly premiums for all insured Employees and Dependents for all benefits.
- 3. Premiums payable to Sun Life will be paid in United States dollars on the premium due date.
- 4. The premium for additional or increased insurance becoming effective during a Policy month will be charged from the next premium due date.
- 5. The premium for insurance terminated during a Policy month will cease at the end of the Policy month in which such insurance terminates.
- 6. Except for fraud, premium adjustments, refunds or charges will be made for only:
 - a. the current Policy Year; and
 - b. the prior Policy Year.

C. Grace Period

The Grace Period is 31 days following a premium due date. During the Grace Period the Policy shall continue in force, unless the Policyholder has given Sun Life written notice to discontinue this Policy. In any event, premiums are payable for any period of time the Policy remains in force.

Sun Life Assurance Company of Canada

PORTABILITY RIDER

Effective September 1, 2010, the following provision is added to Group Policy Number 202577

Portability Privilege

Benefit

If, prior to age 65, an Employee's Accidental Death and Dismemberment Insurance ceases due to termination of his employment, the Employee may apply for portable coverage on his own life, up to the amount of insurance that ceased, to a maximum of \$500,000. The minimum amount of coverage must be \$10,000.

If an Employee elects to apply for portable coverage of any amount of Accidental Death and Dismemberment Insurance, he may also apply for portable coverage to continue any amount of Dependent Accidental Death and Dismemberment Insurance which ceased due to termination of employment.

Application for Portable Coverage

- 1. Written application must be made to Sun Life within the 31 day period following the date the Accidental Death and Dismemberment Insurance ceases.
- 2. Portable coverage will be effective on the day after employment terminates, provided that Sun Life receives the Employee's Application and initial premium for portable coverage within 31 days following termination of employment.
- 3. Portable coverage will be provided under a group term policy providing accidental death and dismemberment benefits only.
- 4. The premium will be the current rate Sun Life charges for the coverage elected under the Portable Group Policy.

Termination of Portable Coverage

Portable coverage will terminate on the occurrence of the earliest of the following:

- the date for which the last premium has been paid by the Employee; or
- the expiration of 10 years following the date portable coverage commences; or
- the date the Employee attains age 65; or
- the date the portable group insurance policy terminates.

SUN LIFE ASSURANCE COMPANY OF CANADA

Chief Executive Officer