

Lump Sum Cancer and/or Heart Attack & Stroke

This Is Lump Sum Cancer Policy

Underwritten by ManhattanLife Insurance and Annuity Company and Standard Life and Casualty Insurance Company
Administrative Office: 10777 Northwest Freeway, Houston, TX 77092 Toll Free Telephone: 800-669-9030

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Alabama

Cancer Policy Form AK7029

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

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Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Alaska

Cancer Policy Form AK7029AK

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

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Heart and Stroke Policy Form AK7030AK

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

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Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Arizona

Cancer Policy Form AK7029AZ

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

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Heart and Stroke Policy Form AK7030AZ

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

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Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

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Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Arkansas

Cancer Policy Form AK7029AR

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Heart and Stroke Policy Form AK7030AR

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

California

Cancer Policy Form AK7029CA

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Domestic Partner.

If coverage terminates due to Your death, Your covered Spouse or Domestic Partner will become the Primary Insured, provided Your Spouse or Domestic Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Heart and Stroke Policy Form AK7030CA

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Coverage for Your insured Spouse or Domestic Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Domestic Partner.

If coverage terminates due to Your death, Your covered Spouse or Domestic Partner will become the Primary Insured, provided Your Spouse or Domestic Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

District of Columbia Cancer Policy Form AK7029DC

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse, Domestic Partner or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse, Domestic Partner, or Civil Union Partner will become the Primary Insured, provided Your Spouse, Civil Union Partner, or Domestic Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Heart and Stroke Policy Form AK7030DC

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Coverage for Your insured Spouse, Domestic Partner, or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse, Domestic Partner, or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse, Domestic Partner, or Civil Union Partner will become the Primary Insured, provided Your Spouse, Domestic Partner, or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Florida

Cancer Policy Form AK7029FL

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of one of the events provided in this "Termination of Insurance" provision.

We will give You at least 45 days advance written notice of cancellation if coverage for a Covered Person terminates due to one of the following circumstances: 1. the date Cancer is diagnosed within the Waiting Period (We will refund the applicable portion of the premium paid for that Covered Person's coverage); 2. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment; 3. the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse, Your insured Spouse's coverage will terminate; or, 4. the insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy. We will pay benefits to the end of the time for which We have accepted premiums.

We will give You at least 10 days advance written notice of cancellation, accompanied by the reason therefor, if coverage terminates due to Your premiums not received by Us when due, subject to the Grace Period provision.

Coverage will terminate on: 1. the date you specify in Your written request for termination; or, 2. the date the Covered Person dies.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030FL

NOTICE OF 30-DAY RIGHT TO EXAMINE THE POLICY - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of one of the events provided in this "Termination of Insurance" provision.

We will give You at least 45 days advance written notice of cancellation if coverage for a Covered Person terminates due to one of the following circumstances: 1. the date a Qualifying Event is Diagnosed within the Waiting Period (We will refund the applicable portion of the premium paid for that Covered Person's coverage); 2. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment; 3. the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse, Your insured Spouse's coverage will terminate; or, 4. the insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy. We will pay benefits to the end of the time for which We have accepted premiums.

We will give You at least 10 days advance written notice of cancellation, accompanied by the reason therefor, if coverage terminates due to Your premiums not received by Us when due, subject to the Grace Period provision.

Coverage will terminate on: 1. the date You specify in Your written request for termination; or, 2. the date the Covered Person dies.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Georgia

Cancer Policy Form AK7029GA

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030GA

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Hawaii

Cancer Policy Form AK7029HI

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a refund of the premium paid by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing this Policy to Us, this Policy will be deemed void from the beginning and the parties shall be in the same position as if no Policy had been issued. We may be reimbursed for the actual medical examination expenses incurred in processing the Policy.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse. Coverage for Your insured Reciprocal Beneficiary will terminate on the premium due date next following the date of Declaration of Termination of Reciprocal Beneficiary Relationship by and between You and Your Reciprocal Beneficiary.

If coverage terminates due to Your death, Your covered Spouse or Reciprocal Beneficiary will become the Primary Insured, provided Your Spouse or Reciprocal Beneficiary is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030HI

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a refund of the premium paid by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing this Policy to Us, this Policy will be deemed void from the beginning and the parties shall be in the same position as if no Policy had been issued. We may be reimbursed for the actual medical examination expenses incurred in processing the Policy.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse. Coverage for Your insured Reciprocal Beneficiary will terminate on the premium due date next following the date of Declaration of Termination of Reciprocal Beneficiary Relationship by and between You and Your Reciprocal Beneficiary.

If coverage terminates due to Your death, Your covered Spouse or Reciprocal Beneficiary will become the Primary Insured, provided Your Spouse or Reciprocal Beneficiary is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Idaho

Cancer Policy Form AK7029ID

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of it being delivered to You for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories, unless the diagnosis can be confirmed in the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Illinois

Cancer Policy Form AK7029IL

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies, and upon receipt of the notification of such death, We will provide a pro-rata refund of any unearned premium; 4. the date Cancer is diagnosed within the Waiting Period; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse or Civil Union Partner will become the Primary Insured, provided Your Spouse or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030IL

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies, and upon receipt of the notification of such death, We will provide a pro-rata refund of any unearned premium; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse or Civil Union Partner will become the Primary Insured, provided Your Spouse or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Indiana

Cancer Policy Form AK7029IN

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

If a Covered Person dies, We will refund the unearned premium for such Covered Person from the date of death to the end of the paid period, and such refund will be computed pro rata.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030IN

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

If a Covered Person dies, We will refund the unearned premium for such Covered Person from the date of death to the end of the paid period, and such refund will be computed pro rata.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Iowa

Cancer Policy Form AK7029

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030

NOTICE OF 30-DAY RIGHT TO EXAMINE THE POLICY - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Kansas

Cancer Policy Form AK7029KS

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning and the parties shall be in the same position as if no policy had been issued.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030KS

Notice of 30-Day Right to Examine The Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning and the parties shall be in the same position as if no policy had been issued.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Kentucky

Cancer Policy Form AK7029KY

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it to Us within 30 days of delivery for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030KY

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it to Us within 30 days of delivery for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Louisiana

Cancer Policy Form AK7029LA

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; or, 6. Cancer that is diagnosed during the Waiting Period.

Heart and Stroke Policy Form AK7030LA

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Maine

Cancer Policy Form AK7029ME

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of delivery for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning as if the Policy had not been issued.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030ME

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of delivery for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning as if the Policy had not been issued.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Maryland

Cancer Policy Form AK7029MD

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. You shall notify Us of the cancellation in writing. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to last day of the Grace Period provision, if the premium due is not paid by the last day of the Grace Period; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Domestic Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Domestic Partner.

If coverage terminates due to Your death, Your covered Spouse or Domestic Partner will become the Primary Insured, provided Your Spouse or Domestic Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; or, 6. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MD

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. on the last day of the Grace Period if the premium due is not paid by the last day of the Grace Period; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Domestic Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Domestic Partner.

If coverage terminates due to Your death, Your covered Spouse or Domestic Partner will become the Primary Insured, provided Your Spouse or Domestic Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage. A condition disclosed on the application for insurance may not be considered a Pre-existing Condition unless the condition is excluded by a signed waiver rider.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. Diagnosis received outside the United States or its territories; 4. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 5. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 6. Anything for which no charge was incurred by the Covered Person.

Michigan

Cancer Policy Form AK7029MI

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MI

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 6. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Minnesota

Cancer Policy Form AK7029MN

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MN

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Mississippi

Cancer Policy Form AK7029MS

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MS

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Missouri

Cancer Policy Form AK7029MO

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; or, 4. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; or, 6. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MO

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; or, 4. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. Diagnosis received outside the United States or its territories; 4. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 5. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 6. Anything for which no charge was incurred by the Covered Person.

Montana

Cancer Policy Form AK7029MT

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return the Policy to Us at Our Administrative Office within 30 days of its delivery and have refunded to You the premium paid. Immediately upon such delivery to Us, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce, annulment, or legal separation by and between You and Your Spouse. At the option of the Spouse, the Conversion Policy may include the Dependent Child(ren) of the Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

We will deliver or mail a written notice of cancellation to Your last-known address shown in Our records at least thirty (30) days in advance of cancellation for nonpayment of premiums.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030MT

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return the Policy to Us at Our Administrative Office within 30 days of its delivery and have refunded to You the premium paid. Immediately upon such delivery to Us, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce, annulment, or legal separation by and between You and Your Spouse. At the option of the Spouse, the Conversion Policy may include the Dependent Child(ren) of the Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

We will deliver or mail a written notice of cancellation to Your last-known address shown in Our records at least thirty (30) days in advance of cancellation for nonpayment of premiums.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Nebraska

Cancer Policy Form AK7029NE

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030NE

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Nevada

Cancer Policy Form AK7029NV

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030NV

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

North Carolina

Cancer Policy Form AK7029NC

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030NC

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

North Dakota

Cancer Policy Form AK7029ND

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030ND

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Oklahoma

Cancer Policy Form AK7029OK

Notice of 30-Day Right to Examine the Policy - If You are not satisfied for any reason, return the Policy to Us or Our agent within 30 days after You have received it. All premiums will be refunded, and Your coverage will be void from the Effective Date. If We do not return any premium or moneys paid within 30 days from the date of cancellation, We will pay interest on the proceeds.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person..

Heart and Stroke Policy Form AK7030OK

Notice of 30-Day Right to Examine the Policy - If You are not satisfied for any reason, return the Policy to Us or Our agent within 30 days after You have received it. All premiums will be refunded, and Your coverage will be void from the Effective Date. If We do not return any premium or moneys paid within 30 days from the date of cancellation, We will pay interest on the proceeds.

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Ohio

Cancer Policy Form AK7029OH

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Heart and Stroke Policy Form AK7030OH

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Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

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Oregon

Cancer Policy Form AK7029OR

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or You and Your Partner.

If coverage terminates due to Your death, Your covered Spouse or Partner will become the Primary Insured, provided Your Spouse or Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Heart and Stroke Policy Form AK7030OR

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Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or You and Your Partner.

If coverage terminates due to Your death, Your covered Spouse or Partner will become the Primary Insured, provided Your Spouse or Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

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Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Pennsylvania

Cancer Policy Form AK7029PA

Notice of Insured's Right to Examine Policy for Thirty Days - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030PA

Notice of Insured's Right to Examine Policy for Thirty Days - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Rhode Island

Cancer Policy Form AK7029RI

Notice of 30-Day Right to Examine the Policy – If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance – Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse or Civil Union Partner will become the Primary Insured, provided Your Spouse or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions – No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. any illness specifically excluded from the definition of Cancer; 4. Cancer that is diagnosed by a Relative or You; 5. Cancer that is diagnosed during the Waiting Period; or, 6. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030RI

Notice of 30-Day Right to Examine the Policy – If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance – Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse or Civil Union Partner will become the Primary Insured, provided Your Spouse or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions – **Pre-Existing Condition Limitations:** We Coverage for Your insured Spouse or Civil Union Partner will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse or Civil Union Partner.

If coverage terminates due to Your death, Your covered Spouse or Civil Union Partner will become the Primary Insured, provided Your Spouse or Civil Union Partner is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

South Carolina

Cancer Policy Form AK7029SC

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person..

Heart and Stroke Policy Form AK7030SC

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

South Dakota

Cancer Policy Form AK7029SD

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed during the Waiting Period; or, 6. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030SD

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related

to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Texas

Cancer Policy Form AK7029TX

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. any illness specifically excluded from the definition of Cancer; 4. Cancer that is diagnosed during the Waiting Period; or, 5. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030TX

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 5. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 6. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Utah

Cancer Policy Form AK7029UT

Notice of 30-Day Right to Examine the Policy – If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it to Our Administrative Office. Immediately upon such delivery, this Policy will be deemed void from the beginning.

Termination of Insurance – Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of entry of divorce decree or entry of a lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the last day of the month when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions – No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed during the Waiting Period; or, 6. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030UT

Notice of 30-Day Right to Examine the Policy – If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it to Our Administrative Office. Immediately upon such delivery, this Policy will be deemed void from the beginning.

Termination of Insurance – Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of entry of a divorce or entry of a lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the last day of the month when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for losses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for six (6) months. This six (6) month period is measured from the Covered Person's Effective Date. After this period, benefits will be available for losses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person; 8. losses that are caused by or the result of the Covered Person's illegal activities, while intoxicated, limited to losses related directly to the Covered Person's voluntary participation.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

Wisconsin

Cancer Policy Form AK7029

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030

NOTICE OF 30-DAY RIGHT TO EXAMINE THE POLICY - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.

West Virginia

Cancer Policy Form AK7029

Notice of 30-Day Right to Examine the Policy - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date Cancer is diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lump Sum Cancer Benefit Amount is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - No benefits will be payable under the Policy for: 1. any disease, sickness or incapacity other than Cancer as defined; this is so even though such disease, sickness, or incapacity may have been complicated, affected directly or indirectly, or caused by Cancer; 2. loss that begins or Cancer that is diagnosed prior to the Covered Person's Effective Date; 3. diagnosis received outside the United States or its territories; 4. any illness specifically excluded from the definition of Cancer; 5. Cancer that is diagnosed by a Relative or You; 6. Cancer that is diagnosed during the Waiting Period; or, 7. Anything for which no charge was incurred by the Covered Person.

Heart and Stroke Policy Form AK7030

NOTICE OF 30-DAY RIGHT TO EXAMINE THE POLICY - If You are not satisfied with this Policy for any reason, You may return it within 30 days of receipt for a full refund of premium by delivering it or mailing it to Our Administrative Office. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning.

Termination of Insurance - Coverage for a Covered Person under this Policy will terminate on the earliest of: 1. the date premiums are not received when due, subject to the Grace Period provision; 2. the date You specify in Your written request for termination; 3. the date the Covered Person dies; 4. the date a Qualifying Event is Diagnosed within the Waiting Period, and We will refund the applicable portion of the premium paid for that Covered Person's coverage; or, 5. the date the Lifetime Maximum Benefit Amount for this Policy is paid for a Covered Person, unless any additional Riders are attached under which benefits are still eligible for payment.

Coverage for Your insured Spouse will terminate on the premium due date next following the date of divorce or lawful dissolution by and between You and Your Spouse.

If coverage terminates due to Your death, Your covered Spouse will become the Primary Insured, provided Your Spouse is a Covered Person under this Policy on the date of Your death.

An insured Child's coverage will terminate on the premium due date next when the Child no longer meets the definition of Child in this Policy.

It is Your responsibility to notify Us of any Covered Person's loss of eligibility for coverage. Our acceptance of premium for any person for whom coverage has terminated will not extend coverage for such person. We will be responsible for only the refund of any unearned premium.

Termination of coverage because a person ceases to be a Covered Person is without prejudice to any claim originating prior to termination of coverage.

Limitations and Exclusions - Pre-Existing Condition Limitations: We will not pay benefits for expenses that result from or are related to a Pre-Existing Condition, or its complications, until the Covered Person has been continuously insured under this Policy for twelve (12) months. This twelve (12) month period is measured from the Policy Effective Date for each Covered Person. After this period, benefits will be available for expenses resulting from or related to a Pre-Existing Condition made known to Us during the underwriting process and not specifically excluded from coverage.

In addition to any benefit-specific conditions, limitations, or exclusions, no benefits will be payable under this Policy for: 1. any disease, sickness or incapacity other than Qualifying Event; this is even though such disease, sickness or incapacity may have been complicated, affected (directly or indirectly) or caused by a Qualifying Event; 2. loss that begins prior to the Policy Effective Date; 3. a Qualifying Event Diagnosed during the Waiting Period; 4. Diagnosis received outside the United States or its territories; 5. intentionally self-inflicted Injury, suicide or any attempt while sane or insane; 6. any illness specifically excluded from the definition of Qualifying Events listed in this Policy; 7. Anything for which no charge was incurred by the Covered Person.

Waiting Period: This Policy has a thirty (30) day Waiting Period. Waiting Period means the first thirty (30) days following a Covered Person's Policy Effective Date. No benefits will be paid for a Qualifying Event that is Diagnosed during the Waiting Period. If a Covered Person is Diagnosed with a Qualifying Event during the Waiting Period, We will terminate the Covered Person's coverage under this Policy and refund the applicable portion of premium paid for that Covered Person's coverage.