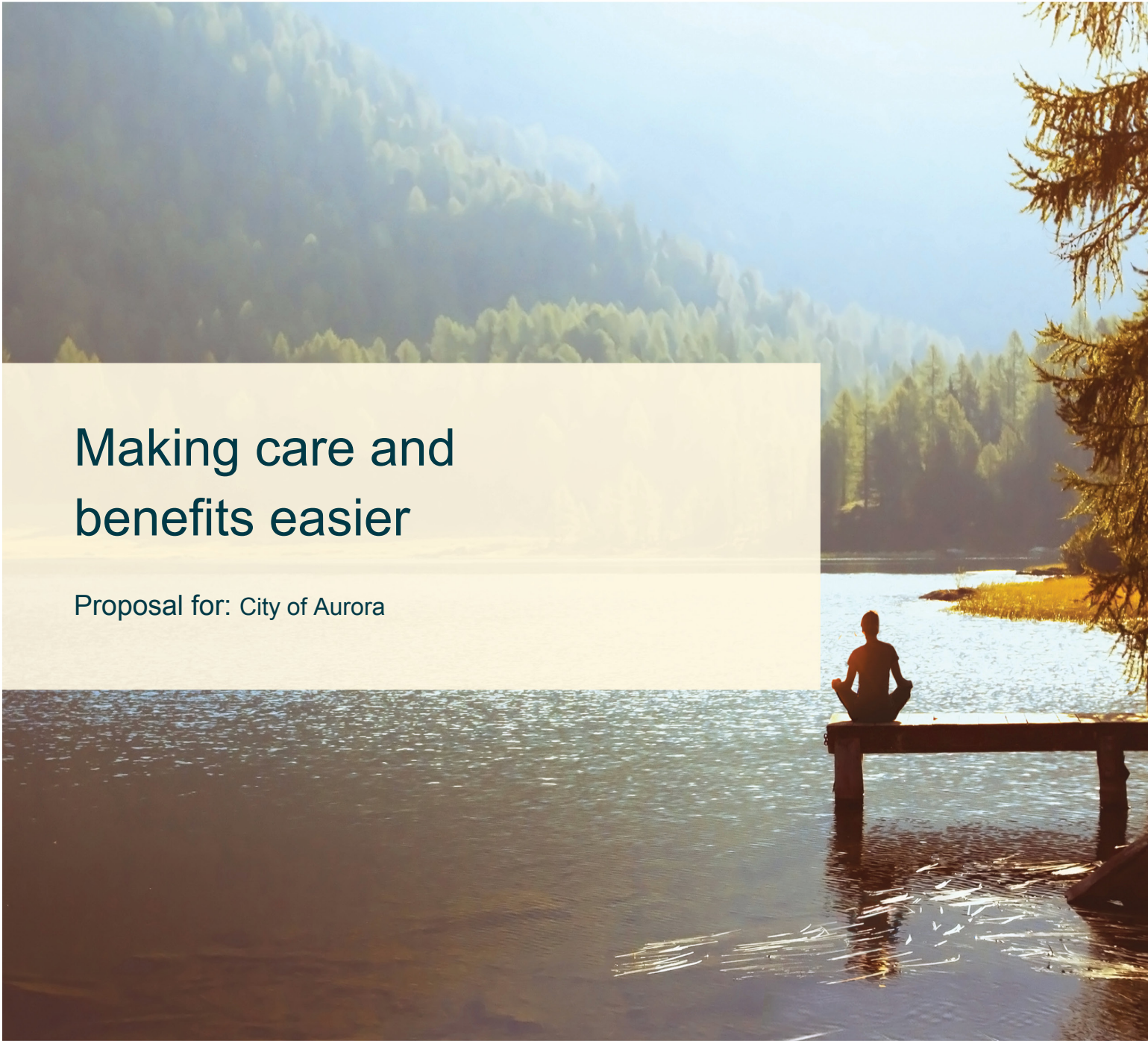




Making care and benefits easier

Proposal for: City of Aurora

Renewal Rates Section

Renewal Effective Date: January 1, 2026

Group Sponsor Name:	City of Aurora
Group Policy Number:	934479

Sun Life will continue this coverage at the referenced renewal rates provided that premium owed is paid to date.

Basic Life

Employee Basic Life and AD&D Current Rates

Coverage	Total employees	Current monthly rate	Total current monthly volume	Total current monthly premium	Total current annual premium
Employee Basic Life	1484	\$0.076	\$122,701,000	\$9,325	\$111,903
Employee Basic AD&D	1171	\$0.020	\$121,136,000	\$2,423	\$29,073
Total current premium				\$11,748	\$140,976
Rate basis: Per \$1,000 of volume					

Employee Basic Life and AD&D Renewal Rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	1484	\$0.076	\$122,701,000	\$9,325	\$111,903
Employee Basic AD&D	1171	\$0.020	\$121,136,000	\$2,423	\$29,073
Total estimated premium				\$11,748	\$140,976
Rate basis: Per \$1,000 of volume					

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Voluntary Life

Employee Voluntary Life and Dependent Voluntary Life Current rates

Employee Voluntary Life

Age band	Participating employees	Current monthly rate	Current monthly volume	Current monthly premium
Under age 20	0	\$0.080	\$0	\$0
20-24	7	\$0.080	\$780,000	\$62
25-29	56	\$0.080	\$6,360,000	\$509
30-34	77	\$0.120	\$13,020,000	\$1,562
35-39	92	\$0.140	\$15,350,000	\$2,149
40-44	77	\$0.180	\$12,660,000	\$2,279
45-49	71	\$0.260	\$11,020,000	\$2,865
50-54	68	\$0.460	\$9,930,000	\$4,568
55-59	32	\$0.820	\$4,850,000	\$3,977
60-64	14	\$1.050	\$890,000	\$935
65-69	5	\$1.680	\$310,000	\$521
70-74	4	\$2.930	\$160,000	\$469
75-79	1	\$2.930	\$30,000	\$88
80-84	0	\$2.930	\$0	\$0
85 and over	0	\$2.930	\$0	\$0
Rate basis: Per \$1,000 of volume				

Spouse Voluntary Life

Age band	Participating employees	Current monthly rate	Current monthly volume	Current monthly premium
Under age 20	0	\$0.070	\$0	\$0
20-24	0	\$0.070	\$0	\$0
25-29	10	\$0.070	\$220,000	\$15
30-34	29	\$0.070	\$520,000	\$36
35-39	36	\$0.090	\$760,000	\$68
40-44	42	\$0.130	\$910,000	\$118
45-49	30	\$0.190	\$680,000	\$129
50-54	30	\$0.300	\$911,000	\$273
55-59	12	\$0.460	\$360,000	\$166
60-64	7	\$0.770	\$95,000	\$73
65-69	2	\$1.250	\$60,000	\$75
70-74	0	\$1.250	\$0	\$0
75-79	1	\$1.250	\$25,000	\$31
80-84	0	\$1.250	\$0	\$0
85 and over	0	\$1.250	\$0	\$0
Rate basis: Per \$1,000 of volume				

Totals

Coverage	Total participating employees	Monthly rate	Total current monthly volume	Total current monthly premium	Total current annual premium
Employee Voluntary Life	504	N/A	\$75,360,000	\$18,689	\$224,271
Spouse Voluntary Life	199	N/A	\$4,541,000	\$985	\$11,825
Child Voluntary Life	246	\$0.065	\$2,460,000	\$160	\$1,919
Total current premium				\$19,834	\$238,015
Rate basis: Per \$1,000 of volume					

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 15-GP-01.

Employee Voluntary Life and Dependent Voluntary Life Renewal rates

Employee Voluntary Life

Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.080	\$0	\$0
20-24	7	\$0.080	\$780,000	\$62
25-29	56	\$0.080	\$6,360,000	\$509
30-34	77	\$0.120	\$13,020,000	\$1,562
35-39	92	\$0.140	\$15,350,000	\$2,149
40-44	77	\$0.180	\$12,660,000	\$2,279
45-49	71	\$0.260	\$11,020,000	\$2,865
50-54	68	\$0.460	\$9,930,000	\$4,568
55-59	32	\$0.820	\$4,850,000	\$3,977
60-64	14	\$1.050	\$890,000	\$935
65-69	5	\$1.680	\$310,000	\$521
70-74	4	\$2.930	\$160,000	\$469
75-79	1	\$2.930	\$30,000	\$88
80-84	0	\$2.930	\$0	\$0
85 and over	0	\$2.930	\$0	\$0

Rate basis: Per \$1,000 of volume

Spouse Voluntary Life

Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.070	\$0	\$0
20-24	0	\$0.070	\$0	\$0
25-29	10	\$0.070	\$220,000	\$15
30-34	29	\$0.070	\$520,000	\$36
35-39	36	\$0.090	\$760,000	\$68
40-44	42	\$0.130	\$910,000	\$118
45-49	30	\$0.190	\$680,000	\$129
50-54	30	\$0.300	\$911,000	\$273
55-59	12	\$0.460	\$360,000	\$166
60-64	7	\$0.770	\$95,000	\$73
65-69	2	\$1.250	\$60,000	\$75
70-74	0	\$1.250	\$0	\$0
75-79	1	\$1.250	\$25,000	\$31
80-84	0	\$1.250	\$0	\$0
85 and over	0	\$1.250	\$0	\$0

Rate basis: Per \$1,000 of volume

Totals

Coverage	Total participating employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Voluntary Life	504	N/A	\$75,360,000	\$18,689	\$224,271
Spouse Voluntary Life	199	N/A	\$4,541,000	\$985	\$11,825
Child Voluntary Life	246	\$0.065	\$2,460,000	\$160	\$1,919
Total estimated premium				\$19,834	\$238,015

Rate basis: Per \$1,000 of volume

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 15-GP-01.

Voluntary AD&D

Employee Voluntary AD&D and Dependent Voluntary AD&D Current Rates

Coverage	Total participating employees	Current monthly rate	Total current monthly volume	Total current monthly premium	Total current annual premium
Employee Voluntary AD&D	285	\$0.030	\$62,250,000	\$1,868	\$22,410
Spouse Voluntary AD&D	148	\$0.030	\$4,775,000	\$143	\$1,719
Child Voluntary AD&D	285	\$0.030	\$2,850,000	\$86	\$1,026
Total current premium				\$2,097	\$25,155
Rate basis: Per \$1,000 of volume					

Employee Voluntary AD&D and Dependent Voluntary AD&D Renewal Rates

Coverage	Total participating employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Voluntary AD&D	285	\$0.030	\$62,250,000	\$1,868	\$22,410
Spouse Voluntary AD&D	148	\$0.030	\$4,775,000	\$143	\$1,719
Child Voluntary AD&D	285	\$0.030	\$2,850,000	\$86	\$1,026
Total estimated premium				\$2,097	\$25,155
Rate basis: Per \$1,000 of volume					

Group Voluntary AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01.

Hospital Indemnity

Hospital Indemnity Current Rates

	Monthly Rate
Employee only	\$14.15
Employee and Spouse	\$29.57
Employee and Children	\$24.70
Employee and Family	\$40.12

Sequence Number: 10

Hospital Indemnity Renewal Rates

	Monthly Rate
Employee only	\$14.15
Employee and Spouse	\$29.57
Employee and Children	\$24.70
Employee and Family	\$40.12

Sequence Number: 10

Group Hospital Indemnity coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy
Form Series 15-GP-01

Accident insurance

Renewal Effective Date: January 1, 2026

Group Sponsor Name:	City of Aurora
Group Policy Number:	934479

Accident Plan Current monthly rates

	High / Off Job
	Off Job
Employee only	\$10.07
Employee and Spouse	\$17.38
Employee and Children	\$19.73
Employee and Family	\$27.04

Accident Plan Renewal monthly rates

	High / Off Job
	Off Job
Employee only	\$10.07
Employee and Spouse	\$17.38
Employee and Children	\$19.73
Employee and Family	\$27.04

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Critical Illness

Employee Current Rates

Class 1

Age band	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

Spouse Current Rates

Class 1

Age band**	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

**The employee's age is used to determine rates.

Child Current Rates

Class 1

Coverage	Monthly rate
All age bands	\$0.77
Rate basis: Per \$1,000 of coverage	

Sequence Number: 6

Monthly Wellness Premium (if included in your choice)			
Wellness Benefit	Monthly add-on rate		
	Employee	Spouse	Child
\$50	\$0.01	\$0.01	No charge

The wellness premium will be added to the elected Critical Illness premium amounts.

Employee Renewal Rates

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

June 24, 2025

Class 1

Age band	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

Spouse Renewal Rates

Class 1

Age band**	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

**The employee's age is used to determine rates.

Child Renewal Rates

Class 1

Coverage	Monthly rate
All age bands	\$0.77
Rate basis: Per \$1,000 of coverage	

Sequence Number: 6

Monthly Wellness Premium (if included in your choice)			
Wellness Benefit	Monthly add-on rate		
	Employee	Spouse	Child
\$50	\$0.01	\$0.01	No charge

The wellness premium will be added to the elected Critical Illness premium amounts.

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

June 24, 2025

Basic Life

Plan design and rates

Employee Basic Life and AD&D plan design

Employee Basic Life		
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week for Classes 1, 2	
	All Full-Time United States Employees working in the United States for Classes 3, 4	
Effective Date	January 1, 2026	
	Class 1	Class 2
Class description	All Eligible Alderman Employees	All Other Eligible Employees
Waiting Period	First of the month following date of employment	First of the month following date of employment
Benefit amount	Flat \$30,000	1 times annual earnings
Maximum benefit	\$30,000	\$200,000
Guaranteed Issue amount	Up to the maximum benefit	Up to the maximum benefit
Retiree termination age	N/A	N/A
Contributions	Noncontributory	Noncontributory
Participation requirement	100%	100%
	Class 3	Class 4
Class description	All Eligible Retired Police and Fire Employees	All Other Eligible Retired Employees
Waiting Period	Not Applicable	Not Applicable
Benefit amount	Flat \$5,000	Flat \$5,000
Maximum benefit	\$5,000	\$5,000
Retiree termination age	65	65
Contributions	Noncontributory	Noncontributory

Employee Basic AD&D		
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week	
Effective Date	January 1, 2026	
	Class 1	Class 2
Class description	All Eligible Alderman Employees	All Other Eligible Employees
Benefit amount	Flat \$30,000	1 times annual earnings
Maximum benefit	\$30,000	\$200,000
Compulsory coverage	Yes	Yes
Contributions	Noncontributory	Noncontributory
Participation requirement	100%	100%

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Basic Life rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	1484	\$0.076	\$122,701,000	\$9,325	\$111,903
Employee Basic AD&D	1171	\$0.020	\$121,136,000	\$2,423	\$29,073
Total estimated premium				\$11,748	\$140,976
Rate basis: Per \$1,000 of volume					
There could be income tax and ERISA implications if the employer-funded Basic Life rates shown above have been reduced in cost (subsidized) by employee-funded Voluntary Life rates that may also be in this proposal. Subsidized rates can potentially create additional imputed income for some employees (under IRC Section 79) and potentially violate ERISA's fiduciary rules. As a group insurance carrier, Sun Life cannot make this determination for you. We recommend that you consult with your tax consultant and attorney before implementing the Basic and Voluntary Life rates in this proposal.					

Sequence Number: 4

Included in this plan:

- This proposal is net of broker commissions
- 24-month rate guarantee from the Effective Date
- Employee age reductions: None
- Waiver of Premium: For employees with an approved disability prior to age 65, premium is waived until age 65 or for 12 months (whichever is later). For employees disabled on or after age 65 but prior to age 70, premium is waived for 12 months. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation. This provision is applicable to Classes 1, 2.

Waiver of premium is provided on the following benefits: Employee Basic Life.

- Portability: Coverage may be ported upon termination of active employment for Classes 1, 2.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000 for Classes 1, 2.
- A choice of one Value-Added Service: Self Care+, Emergency Travel Assistance & ID Theft, or Online Will Preparation & Claimant Support Services.²
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff for Classes 1, 2.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder for Classes 1, 2.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness for Classes 1, 2.
- Employee coverage is rounded to the next highest \$1,000 for Class 2.

Classes 1, 2

- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
 - Air Bag

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

- Bereavement Counselling
- Seat Belt

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Voluntary Life

Plan design and rates

Employee Voluntary Life and Dependent Voluntary Life plan design

Employee Voluntary Life	
Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Waiting Period	First of the month following date of employment
Benefit amount	Increments of \$10,000
Maximum benefit	\$500,000 or 5 times annual earnings, whichever is less
Guaranteed Issue amount	Lesser of current amount or \$250,000
Participation requirement	20%

Spouse Voluntary Life	
Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Spouse benefit amount	Increments of \$5,000
Spouse maximum benefit	\$50,000
Spouse Guaranteed Issue amount	Lesser of current amount or \$25,000
Maximum % of employee coverage	100%
Spouse termination age	N/A

Employee must elect Voluntary Life to elect Spouse Voluntary Life / AD&D

Child Voluntary Life	
Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Child benefit amount	Flat \$10,000
Child maximum benefit	\$10,000
Child Guaranteed Issue amount	Up to the maximum benefit
Full child benefit begins	birth
Child eligibility	Unmarried dependent children from birth to age 26
Maximum % of employee coverage	100%

Employee must elect Voluntary Life to elect Child Voluntary Life / AD&D

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Voluntary Life rates

Employee Voluntary Life

Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.080	\$0	\$0
20-24	7	\$0.080	\$780,000	\$62
25-29	56	\$0.080	\$6,360,000	\$509
30-34	77	\$0.120	\$13,020,000	\$1,562
35-39	92	\$0.140	\$15,350,000	\$2,149
40-44	77	\$0.180	\$12,660,000	\$2,279
45-49	71	\$0.260	\$11,020,000	\$2,865
50-54	68	\$0.460	\$9,930,000	\$4,568
55-59	32	\$0.820	\$4,850,000	\$3,977
60-64	14	\$1.050	\$890,000	\$935
65-69	5	\$1.680	\$310,000	\$521
70-74	4	\$2.930	\$160,000	\$469
75-79	1	\$2.930	\$30,000	\$88
80-84	0	\$2.930	\$0	\$0
85 and over	0	\$2.930	\$0	\$0

Rate basis: Per \$1,000 of volume

Spouse Voluntary Life

Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.070	\$0	\$0
20-24	0	\$0.070	\$0	\$0
25-29	10	\$0.070	\$220,000	\$15
30-34	29	\$0.070	\$520,000	\$36
35-39	36	\$0.090	\$760,000	\$68
40-44	42	\$0.130	\$910,000	\$118
45-49	30	\$0.190	\$680,000	\$129
50-54	30	\$0.300	\$911,000	\$273
55-59	12	\$0.460	\$360,000	\$166
60-64	7	\$0.770	\$95,000	\$73
65-69	2	\$1.250	\$60,000	\$75
70-74	0	\$1.250	\$0	\$0
75-79	1	\$1.250	\$25,000	\$31
80-84	0	\$1.250	\$0	\$0
85 and over	0	\$1.250	\$0	\$0

Rate basis: Per \$1,000 of volume

Totals

Coverage	Total participating employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Voluntary Life	504	N/A	\$75,360,000	\$18,689	\$224,271
Spouse Voluntary Life	199	N/A	\$4,541,000	\$985	\$11,825
Child Voluntary Life	246	\$0.065	\$2,460,000	\$160	\$1,919
Total estimated premium				\$19,834	\$238,015

Rate basis: Per \$1,000 of volume

Sequence Number: 8

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

June 24, 2025

Included in this plan:

- A flat 15% broker commission
- 12-month rate guarantee from the Effective Date
- Employee age reductions: None
- Spouse age reductions: None
- Waiver of Premium: For employees with an approved disability prior to age 65, premium is waived until age 65 or for 12 months (whichever is later). For employees disabled on or after age 65 but prior to age 70, premium is waived for 12 months. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of Premium is provided on the following benefits: Employee Voluntary Life.

- Portability Coverage may be ported upon termination of active employment.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Voluntary AD&D

Plan design and rates

Employee Voluntary AD&D and Dependent Voluntary AD&D plan design

Employee Voluntary AD&D

Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Waiting Period	First of the month following date of employment
Benefit amount	Increments of \$10,000
Maximum benefit	\$500,000 or 5 times annual earnings, whichever is less
Minimum benefit	N/A
Compulsory coverage	No
Contributions	Contributory

Spouse Voluntary AD&D

Eligible employees	All Full-Time and Part-Time United States Employees working in the United States enrolled in Employee Voluntary AD&D Insurance who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Spouse Benefit amount	Increments of \$5,000
Spouse Maximum benefit	\$50,000
Minimum benefit	N/A
Maximum % of employee coverage	100%
Spouse termination age	70
Compulsory AD&D coverage	No

Employee must elect Voluntary AD&D to elect Dependent Voluntary AD&D

Child Voluntary AD&D

Eligible employees	All Full-Time and Part-Time United States Employees working in the United States enrolled in Employee Voluntary AD&D Insurance who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
	Class 1
Class description	All Eligible Employees
Child Benefit amount	Flat \$10,000
Child Maximum benefit	\$10,000
Full child benefit begins	birth
Child eligibility	Unmarried dependent children from birth to age 26
Maximum % of employee coverage	50%
Compulsory AD&D coverage	No

Employee must elect Voluntary AD&D to elect Dependent Voluntary AD&D

Voluntary AD&D rates

Group Voluntary AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01.

Coverage	Total participating employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Voluntary AD&D	285	\$0.030	\$62,250,000	\$1,868	\$22,410
Spouse Voluntary AD&D	148	\$0.030	\$4,775,000	\$143	\$1,719
Child Voluntary AD&D	285	\$0.030	\$2,850,000	\$86	\$1,026
Total estimated premium				\$2,097	\$25,155
Rate basis: Per \$1,000 of volume					
Sequence Number: 12					

Included in this plan:

- A flat 10% broker commission.
- 24-month rate guarantee from the Effective Date
- Employee age reductions: None
- Spouse age reductions: None
- Portability: Coverage may be ported upon termination of active employment.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Employees who decline coverage will have a 6 months waiting period before they can re-enroll.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings to not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage.
- Special AD&D benefits:
 - Air Bag
 - Rehabilitative Training
 - Repatriation
 - Seat Belt
 - Surgical Reattachment

Group Voluntary AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01.

Assumptions

- Dependents are eligible for coverage only when the employee is insured. Dependent coverage amounts are subject to state requirements.
- Coverage for dependents who are hospital-confined due to illness or injury will be effective on the date they are no longer hospital-confined. Hospital-confined does not apply to a newborn child.
- Notification of any employer-completed merger or acquisition.
- Evidence of Insurability is required for late entrants, coverage increases, and coverage in excess of the Guaranteed Issue amount.
- For Voluntary AD&D insurance evidence of Insurability is not required.

Group Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Hospital Indemnity insurance

Plan design and rates

Eligible employees	All United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date	January 1, 2026
Policy issue requirement	5 enrolled employees

Class 1	
Class description	All Eligible Employees
Eligibility Waiting Period	First of the month following date of employment
Contributions	Contributory
Member direct billing	Not included
Employer contributions	Employee: 0% Spouse: 0% Child(ren): 0% Family: 0%

First Day Benefits	
Payable per benefit year	
First Day Hospital	\$500 per day 1 day

Confinement Benefits	
Payable per benefit year	
Hospital Confinement	\$100 per day 30 days Payable with First Day Hospital
ICU Confinement	\$100 per day 10 days Payable with First Day Hospital Payable with Hospital Confinement

Additional & Enhanced Benefits	
Payable per benefit year	
Extended Hospitalization	\$100 per day The additional benefit pays after 10 total days in a row of confinement beginning with your first day in: - a regular hospital room - the ICU
Wellness Screening	\$50 per day 1 day per insured per benefit year

Covered Conditions	
Newborn Care	Complications only; payable under Hospital or ICU Confinement
Complications of Pregnancy	Included
Normal Pregnancy	Included
Normal Pregnancy Waiting Period	No Waiting Period
Mental/Nervous	Included

Group Hospital Indemnity Insurance coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01, 20-HI-C-01, 12-GPPort-P-01, 20-HIPORT-C-01, subject to state availability.

Substance Abuse	Included
Sickness and Accidents	Sickness: 24-hour coverage; Accident: 24 Hour coverage
Pre-existing Condition Limitation	Not included

Hospital Indemnity monthly rates

Employee only	\$14.15
Employee and Spouse	\$29.57
Employee and Children	\$24.70
Employee and Family	\$40.12

Sequence Number: 10

Definitions

State variations may apply and not all definitions below may apply to your plan.

Benefit year means a calendar year beginning on January 1 of any year and ending on December 31 of that year.

Confinement means on the advice of a Physician, the assignment of a person to a bed as a resident inpatient in a Hospital for not less than 20 continuous hours. There must be a charge for room and board. The requirement that an Insured be charged for room and board does not apply to confinement in a Veteran's Administration Hospital or other federal government operated Hospital. An Observation Unit stay of 20 hours or more will be paid under the First Day Hospital Confinement Benefit. An Observation Unit stay of 20 hours or more will be covered under the Daily Hospital Confinement Benefit. Confinement does not include that period of time during which an Insured is in a Hospital Emergency Room, Observation Room, a freestanding surgical facility or an outpatient facility. Confinement does not include a newborn child's initial confinement in a Hospital following birth for routine medical and nursing care, except as specifically provided for in the Newborn Nursery Confinement if covered under your plan.

Covered Accident means an Accident that is not excluded by the Policy or applicable riders or endorsements attached to it.

Covered Sickness means a Sickness that is not excluded by the Policy or applicable riders or endorsements attached to it.

Extended Hospitalization pays an additional benefit if an Insured has been confined for at least the amount of days shown in the schedule above. This benefit is payable in addition to each day of Hospital Confinement (and Intensive Care Unit or Intermediate Step-Down Unit Confinement if included in the plan), beginning with the first day of Confinement.

Hospital means a facility licensed in the applicable jurisdiction that provides medical care and Treatment to sick and injured persons on an Inpatient basis with 24 hour nursing service by or under the supervision of a Physician. Hospital does not include a rest home; a Skilled Nursing Facility; an extended care facility; a place of convalescence; a Rehabilitation Unit; a Hospice Facility; a place providing custodial care; a Mental and Nervous Disorder Facility or a Substance Abuse Facility.

Hospital Intensive Care Unit (ICU) means a specifically designated part of a Hospital called an intensive care unit that provides the highest level of medical care and is restricted to patients who are critically ill or injured and who require intensive comprehensive observation and care, including a neonatal intensive care unit specializing in the care of ill or premature newborn infants; is separate and apart from the surgical recovery room and from rooms, beds and wards customarily used for patient confinement; is permanently equipped with special lifesaving equipment for the care of the critically ill or injured; is under constant and continuous observation by a specially trained nursing staff assigned exclusively to the intensive care unit on a 24 hour basis and has an assigned Physician on a full-time basis.

Group Hospital Indemnity Insurance coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 15-GP-01, 20-HI-C-01, 12-GPPort-P-01, 20-HIPORT-C-01, subject to state availability.

A hospital intensive care unit is not any of the following step-down units: a progressive care unit; an intermediate care unit; a private monitored room; sub-acute intensive care unit or an Observation Unit.

Inpatient or Inpatient Treatment means the Insured who receives Treatment as a resident patient using and being charged for the room and board facilities of a Hospital. The requirement that an Insured be charged does not apply to confinement in a Veteran's Administration Hospital or other federal government operated Hospital.

Observation Unit means a specified area within a Hospital, apart from the Emergency Room, where a patient can be monitored by a Physician and which is under the direct supervision of a Physician or registered nurse; is staffed by nurses assigned specifically to that unit; and provides care seven days per week, 24 hours per day.

An observation unit stay lasting 20 hours or more is treated as a Hospital Confinement.

Rehabilitation Unit means a distinct unit within a Hospital that provides rehabilitation care services on an Inpatient basis. Rehabilitation care services consist of multidisciplinary physical restorative services to achieve the highest possible functional ability for disability due to Sickness or Injury. Services are provided by or under the supervision of a trained and experienced rehabilitation Physician.

A rehabilitation unit is not a freestanding rehabilitative facility; a nursing home; an extended care facility; a Skilled Nursing Facility; a rest home or home for the aged; a Hospice Facility; a facility for the Treatment of alcoholism or drug addiction or an assisted living facility.

Important Information

- Please also refer to the Policy Disclosures for additional details.
- The Confinement must occur on or after the effective date of insurance.
- Based on the limited available regulatory guidance, Sun Life believes its Hospital Indemnity insurance is appropriate for use with an HSA and may be purchased when the employee and/or their family members are covered under an HDHP. However, Sun Life cannot provide legal or tax advice. If there are legal or tax questions, we suggest that the employee consult their own legal or tax advisor before purchasing this insurance.
- This is a limited benefit policy. It does NOT provide basic hospital, basic medical, or major medical insurance. It is not a Medicare Supplement policy. The certificate has exclusions, limitations, and benefit waiting periods for certain conditions that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy, certificate and any rider, if applicable, may not be available in all states and may vary based on state laws and regulations.

Included in this plan

- No health questions required.
- 12-month rate guarantee from the Effective Date.
- Eligible Child(ren): to age 26.
- Continuation – until the policy termination.

Group Hospital Indemnity Insurance coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01, 20-HI-C-01, 12-GPPort-P-01, 20-HIPORT-C-01, subject to state availability.

Assumptions

- Notification of any employer-completed merger or acquisition.
- Retired, temporary, part-time, seasonal, leased, and contracted (1099) employees are not eligible to participate.
- Employee must be insured in order to elect benefits for Dependents.
- No person may be insured as an Employee and as a spouse of an Employee.
- No person may be insured as a Dependent Child of more than one Employee.
- This group has a minimum lives requirement. If the group drops below the required minimum lives, this proposal is not valid, and Sun Life reserves the right to rerate or decline the case. The minimum lives requirement can be found under the Plan Design and Rates section.

Group Hospital Indemnity Insurance coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01, 20-HI-C-01, 12-GPPort-P-01, 20-HIPORT-C-01, subject to state availability.

Accident insurance

Plan design and rates

Accident Insurance plan design

Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week	
Effective Date	January 1, 2026	
Participation requirement	5 enrolled employees	
	Class 1	
Class description	All Eligible Employees	
Eligibility Waiting Period	First of the month following date of employment	
Contributions	Contributory	
Member direct billing	Not included	
Covered benefits		
Life and Dismemberment Losses *		
Accidental Death	\$25,000	
Accidental Death Common Carrier	\$100,000	
Catastrophic Loss: Both arms or both hands, both legs or both feet, one hand and one foot or one arm and one leg, or irrecoverable loss of sight of both eyes	\$15,000	
One hand, one foot, one leg, one arm	\$7,500	
Loss of sight of one eye or loss of one eye	\$7,500	
Two or more fingers or toes	\$1,500	
One finger or one toe	\$750	
Dislocations		
	Open	Closed
Hip	\$4,000	\$2,000
Knee, ankle, or bones of the foot	\$2,000	\$1,000
Elbow, wrist or Lower jaw	\$800	\$400
Shoulder	\$1,000	\$500
Collarbone or bones of the hand	\$1,600	\$800
Finger(s) or toe(s)	\$200	\$100

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Fractures		
	Open	Closed
Hip or thigh	\$4,000	\$2,000
Skull-depressed	\$6,000	\$3,000
Skull-simple	\$3,000	\$1,500
Vertebral processes, Bones of the face or Nose	\$700	\$350
Leg	\$2,000	\$1,000
Vertebrae, Sternum or Pelvis	\$1,600	\$800
Upper jaw or upper arm	\$750	\$375
Lower jaw, Collarbone, Shoulder, Forearm, Hand, Wrist, Foot, Ankle, Kneecap, Elbow or Heel	\$650	\$325
Rib, Finger, Toe or Coccyx	\$350	\$175
Multiple ribs	\$1,000	\$500
Additional Injuries		
Eye Injury - surgical repair	\$250	
Eye Injury - object remove	\$250	
Gunshot wound	\$500	
Paralysis—paraplegia	\$25,000	
Paralysis—quadriplegia	\$50,000	
Coma	\$10,000	
Concussion	\$100	
Lacerations		
No sutures and treated by doctor	\$35	
Single laceration under 5 cm with sutures	\$65	
5-15 cm with sutures (total of all lacerations)	\$250	
Greater than 15 cm with sutures (total of all lacerations)	\$500	
Burns		
	2nd Degree	3rd Degree
21-40 square centimeters	\$400	\$1,000
41-65 square centimeters	\$800	\$2,000
66-160 square centimeters	\$1,200	\$6,000
161-225 square centimeters	\$1,600	\$14,000
More than 225 square centimeters	\$2,000	\$20,000
Skin graft	50% of the applicable Burn Benefit	

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Medical Services	
Diagnostic Exam Arteriogram, Angiogram, CT, CAT, EKG, EEG, or MRI (1 time per benefit year)	\$200
Diagnostic Exam X-ray (1 time per covered accident)	\$30
Accident Emergency Treatment, non- emergency room (once per covered accident)	\$50
Physician's Follow-up Treatment office visit (per visit, up to 6 times per covered accident)	\$25
Physical Therapy (per visit up to 10 visits per covered accident)	\$25
Medical Devices	\$125
Epidural Pain Management (up to 2 times per covered accident)	\$50
Prescription drug	\$25
Prosthesis (one)	\$500
Prosthesis (two)	\$1,000
Blood, Plasma, or Platelet Transfusion	\$200
Hospital	
Hospital Admission (once per benefit year)	\$1,000
Hospital Confinement (per day up to 365 days per covered accident)	\$250
Intensive Care Unit Admission (once per Benefit Year; payable instead of Hospital Admission benefit if Confined immediately to ICU)	\$1,500
Intensive Care Unit Confinement (per day up to 15 days, payable in addition to any Hospital Confinement benefit)	\$500
Ambulance (Ground)	\$200
Ambulance (Air)	\$1,500
Emergency Room Admission	\$150
Family Lodging (per day up to 30 days per benefit year)	\$100
Transportation (100 or more miles up to 3 times per covered accident)	\$500
Rehabilitation Unit (per day up to 30 days per covered accident)	\$100
Surgery	
Miscellaneous Surgery requiring general anesthesia (not covered by any other benefit)	\$300
Open Surgery	\$1,250
Exploratory Surgery or Debridement	\$250
Tendon/Ligament/Rotator Cuff Tear	\$625
Torn Knee Cartilage	\$625
Ruptured/Herniated Disc	\$625

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Emergency Dental	
Emergency Dental extraction	\$65
Emergency Dental crown	\$200
Wellness	
Wellness Screening Benefit (once per benefit year)	\$50

Unless otherwise specified, the above benefits will be payable only once for each Covered Accident as applicable.

* Life and dismemberment losses: Benefits displayed are payable for the employee only. Spouse benefits are 100% of the employee benefit amount for death and 100% of the employee benefit amount for dismemberment. Dependent children benefits are 50% of the employee benefit amount for death and 50% of the employee benefit amount for dismemberment.

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Accident Plan monthly rates

	High / Off Job
	Off Job
Employee only	\$10.07
Employee and Spouse	\$17.38
Employee and Children	\$19.73
Employee and Family	\$27.04

Included in this plan:

- 12-month rate guarantee from the Effective Date.
- Portability
- Coverage options
 - Employee, spouse, and dependent children

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Assumptions

- Notification of any employer-completed merger or acquisition.
- Retired, temporary, part-time, seasonal, leased, and contracted (1099) employees are not eligible to participate.
- No person may be insured as a Dependent Child of more than one Employee.
- No person may be insured as an Employee and as a spouse of an Employee.
- This proposal offers off the job only coverage.
- A minimum of 5 enrolled employees is required at point of sale. Proposals will not be valid if there are less than 5 enrolled employees.

Group Accident Insurance is underwritten by
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

Critical Illness

Series 16

Plan design and rates

Eligible employees	All Full-Time and Part-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week		
Effective Date	January 1, 2026		
	Class 1		
Class description	All Eligible Employees		
	EMPLOYEE	SPOUSE	CHILD
Benefit amount	Benefit amounts may range from \$5,000 to \$30,000 in \$5,000 increments.	Benefit amounts may range from \$2,500 to \$10,000 in \$2,500 increments. Amount cannot exceed 50% of the employee amount.	Benefit amounts may range from \$2,500 to \$5,000 in \$2,500 increments. Amount cannot exceed 50% of the employee amount.
Guaranteed issue amount	\$30,000	\$10,000	\$5,000
Eligibility waiting period	First of the month following date of employment	N/A	N/A
Contributions	Contributory	Contributory	Contributory
Member direct billing	Not included	Not included	Not included
Employer contribution	0%	0%	0%
Participation requirement	15%	N/A	N/A
Policy issue requirement	5 enrolled employees	N/A	N/A

	Class 1	
Class description	All Eligible Employees	
	Initial Diagnosis	Recurrence
Core conditions		
Heart attack	100%	100% of face amount
Stroke	100%	100% of face amount
Major organ failure	100%	100% of face amount
End-stage kidney disease	100%	100% of face amount
Occupational HIV/Hepatitis B, C, or D	100%	N/A
Coronary artery bypass graft	25%	25% of face amount
Angioplasty	5%	5% of face amount
Cancer conditions		
Invasive cancer	100%	100% of face amount
Non-invasive cancer	25%	25% of face amount
Skin cancer	5%	5% of face amount
Supplemental conditions option 1		
Complete blindness	100%	N/A
Loss of speech	100%	N/A
Complete loss of hearing	100%	N/A
Supplemental conditions option 2		
Benign brain tumor	100%	N/A
Paralysis	100%	N/A
Coma	100%	N/A
Severe burns	100%	N/A

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

Supplemental conditions option 3		
Advanced ALS or Lou Gehrig's disease	100%	N/A
Advanced Alzheimer's	25%	N/A
Advanced Parkinson's	25%	N/A
Childhood conditions - child only		
Down syndrome	100%	N/A
Cerebral palsy	100%	N/A
Cystic fibrosis	100%	N/A
Cleft lip/palate	100%	N/A
Type 1 diabetes mellitus	100%	N/A
Muscular dystrophy	100%	N/A
Complex congenital heart disease	100%	N/A
Spina bifida	100%	N/A
Wellness benefit		
Annual wellness screening benefit	Employee: \$50 Spouse: \$50 Child: \$50	
Additional Provisions:		
Additional occurrence waiting period	6 Months between diagnosis	
Maximum benefit	1 time per condition	
Recurrence waiting period	12 months	
Cancer recurrence waiting period	12 months	
Recurrence maximum	Unlimited	

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)
under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01
and 13-SD-R-01, subject to state availability.

Critical Illness rates

Class 1

Employee benefit (see additional Wellness premium below)	
Age band	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

Class 1

Spouse benefit (see additional Wellness premium below)	
Age band**	Uni-Tobacco Monthly rate*
Under age 30	\$0.51
30-39	\$0.82
40-49	\$1.81
50-59	\$3.75
60-69	\$6.85
70 and over	\$13.28
Rate basis: Per \$1,000 of coverage	

*Attained age rating applies – premiums will increase due to age increase.

**The employee's age is used to determine rates.

Class 1

Child benefit	
Coverage	Monthly rate
All age bands	\$0.77
Rate basis: Per \$1,000 of coverage	

Sequence Number: 6

Monthly Wellness Premium (if included in your choice)			
Wellness Benefit	Monthly add-on rate		
	Employee	Spouse	Child
\$50	\$0.01	\$0.01	No charge

The wellness premium will be added to the elected Critical Illness premium amounts.

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

Important Information

Please also refer to the Policy Disclosures for additional details.

Critical Illness insurance is a limited benefit policy. It does not provide basic hospital, basic medical, or major medical insurance and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. The certificate has exclusions and limitations (as detailed in the Policy Disclosures) which may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy and certificate may not be available in all states and may vary based on state laws and regulations.

Note Regarding Employees Covered or Considering Coverage under Health Savings Accounts (HSA) Established in Connection with High Deductible Health Plans (HDHP):

Based on the limited available regulatory guidance, Sun Life believes its Critical Illness insurance is appropriate for use with an HSA and may be purchased when the employee and/or their family members are covered under an HDHP. However, Sun Life cannot provide legal or tax advice. If there are legal or tax questions, we suggest that the employee consult their own legal or tax advisor before purchasing this insurance.

Included in this plan:

- 24-month rate guarantee from the Effective Date
- Employee must be insured in order to elect benefits for Dependents
- Eligible Child(ren): to age 26.
- Health Navigator Help Line
- Portability - greater of to Age 70 or 12 months

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

Assumptions

- Notification of any employer-completed merger or acquisition.
- Retired, temporary, part-time, seasonal, leased, and contracted (1099) employees are not eligible to participate.
- No person may be insured as a Dependent Child of more than one Employee.
- No person may be insured as an Employee and as a spouse of an Employee.
- The greater of 5 lives or 15% participation is required at point of sale. If participation is not achieved, this proposal is not valid, and Sun Life reserves the right to decline the case.

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.