

YOUR PERSONAL ACCIDENT INSURANCE PLAN

For Members of



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This certificate provides coverage for losses due to ACCIDENTS only. It does not provide insurance coverage for sickness or losses due to sickness.

B-15885 (04-15)
Grandfathered

A00TCAS

**RELIASTAR LIFE INSURANCE COMPANY
Minneapolis, Minnesota 55440**

ReliaStar Life Insurance Company (ReliaStar Life) certifies that it has issued the Group Policy listed below to the Policyholder. All benefits are controlled by the terms and conditions of the Group Policy. The Group Policy is on file in the Policyholder's office. You may look at the Group Policy there.

**Group Policy Number
68331-1ASCPAI**

**Policyholder
Minnesota Benefit Association**

The insurance included in this certificate applies to you only if you have elected and are insured for it.

The certificate summarizes and explains the parts of the Group Policy which apply to you. This certificate is not an insurance policy. In any case of differences or errors, the Group Policy rules.

This certificate replaces any other certificates ReliaStar Life may have given you under the Group Policy.



Registrar

SCHEDULE OF BENEFITS

Accidental Death and Dismemberment (AD&D) Insurance

Full Amount of AD&D Insurance*

MEMBER:

The amount of AD&D Insurance is determined by which plan the Member's Township selects:

- Option 1: \$1,000
- Option 2: \$2,000

MEMBER'S INSURANCE

Eligibility

The member is eligible on the later of the following dates:

- The Group Policy's Effective Date.
- The date the member becomes a member of the Policyholder.

The member must meet the following conditions to become insured:

- Be eligible for the insurance.
- Apply for the insurance, if you have to pay any part of the premium.
- For member be at least age 80 on the date of application.

Effective Date of Member's Insurance

For members, insurance starts on the first day of the first month on or after the later of the following dates:

- You become eligible for insurance.
- You apply for insurance, if you have to pay any part of the premium.
- Your premium is received.

Effective Date of Change in Amount of Insurance

If there is an increase in the amount of your insurance, the increase will take effect on the first day of the month on or next following the date of the scheduled increase.

If there is a decrease in the amount of your insurance, the decrease will take effect on the first day of the month on or next following the date of the scheduled decrease.

Termination of Insurance

Your insurance stops on the earliest of the following dates:

- The last day of the month during which you are no longer eligible for insurance under the Group Policy.
- The date the Group Policy stops.
- The end of the period for which you paid premiums, if you do not make the next required premium contribution when due.

ReliaStar Life stops providing a specific benefit to you on the date that benefit is no longer provided under the Group Policy.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

Accidental Death & Dismemberment (AD&D) Insurance

ReliaStar Life pays this benefit for covered losses due to a covered accident. All of the following conditions must be met:

- You are covered for AD&D Insurance on the date of the accident.
- The loss occurs within 180 days of the date of the accident.
- The cause of the loss is not excluded.

Unless otherwise indicated, ReliaStar Life pays only one Full Amount for losses and benefits while the Group Policy is in effect. The Full Amount is shown on the Schedule of Benefits. For example, if you have a loss for which ReliaStar Life paid 50% of the Full Amount, ReliaStar Life pays no more than 50% of the Full Amount for the next loss.

AD&D Benefit

Covered Accident Resulting In:

The benefit is:

Loss of life	Full Amount
Loss of both hands, both feet or sight of both eyes	Full Amount
Loss of one hand and one foot	Full Amount
Loss of one hand or one foot and sight of one eye	Full Amount
Loss of one hand or one foot or sight of one eye	50% of Full Amount

Loss of hands or feet means loss by being permanently, physically severed at or above the wrist or ankle. Loss of sight means total and permanent loss of sight.

Unless otherwise indicated, ReliaStar Life does not pay a benefit for loss of use of one or both hands or feet, or thumb and index finger of the same hand.

Death benefits are paid to your beneficiary. Unless otherwise indicated, all other benefits are paid to you.

Accidental Death and Dismemberment Exclusions

ReliaStar Life does not pay benefits for loss directly or indirectly caused by any of the following:

- An accident occurring before the Effective Date of the Group Policy.
- Suicide or intentionally self-inflicted injury, while sane or insane.
- Physical or mental illness.
- Bacterial infection or bacterial poisoning. **Exception:** Infection from a cut or wound caused by an accident.
- Riding in or descending from an aircraft as a pilot or crew member.
- Any armed conflict, whether declared as war or not, involving any country or government.
- An accident which occurs while in the military service for any country or government.
- An accident which occurs when you commit or attempt to commit a felony.
- Voluntary use of any drug, medication, or sedative unless –
 - prescribed by a doctor and
 - taken as directed by a doctor or the manufacturer.
- Driving or operating a motor vehicle while intoxicated. Intoxicated means your blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.

CLAIM PROCEDURES

Submitting a Claim

You, your insured dependent or someone on your behalf must send ReliaStar Life or its authorized representative written notice of the loss on which your claim will be based. The notice must –

- include information to identify you or your insured dependent, like your name, address and Group Policy number.
- be sent to ReliaStar Life or one of its licensed agents authorized to accept claims.
- be sent within 20 days after the loss for which claim is based has occurred or as soon as reasonably possible.

Claim Forms

ReliaStar Life or its authorized agent will send proof of loss claim forms to you, your insured dependent or to the Policyholder to give to you. ReliaStar Life will send the forms within 15 days after ReliaStar Life receives your notice of claim.

You, your insured dependent or someone on your behalf must return the completed proof of loss claim forms to ReliaStar Life within 90 days of the loss. Failure to furnish such proof within the time required will not invalidate nor reduce any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity, later than one year from the time proof is otherwise required.

Written proof of loss includes details of how the loss occurred.

Benefit Payments

Benefits under the Group Policy are paid when proof of loss is received. Claims are paid in the order received.

Payment of Proceeds

Where indicated, ReliaStar Life pays proceeds to the beneficiary. If there is more than one beneficiary, each receives an equal share, unless you have requested otherwise, in writing. To receive proceeds, a beneficiary must be living on the earlier of the following dates:

- The date ReliaStar Life receives proof of your death.
- The tenth day after your death.

If there is no eligible beneficiary or if you did not name one, ReliaStar Life pays the proceeds in the following order:

1. Your spouse.
2. Your natural and adopted children.
3. Your parents.
4. Your estate.

The person must be living on the tenth day after your death.

Overpayment

If ReliaStar Life pays a benefit under the Group Policy and it is later shown that a lesser amount should have been paid, ReliaStar Life will be entitled to a refund of the excess.

GENERAL PROVISIONS

Health Insurance Assignment

You or your insured dependent may not transfer to anyone else –

- ownership of any certificate issued under the Group Policy.
- insurance under the Group Policy.

Legal Action

Legal action may not be taken to receive benefits until 60 days after the date proof of loss is submitted according to the requirements of the Group Policy. Legal action must be taken within 3 years after the date proof of loss must be submitted.

If the Policyholder's state requires longer time limits, ReliaStar Life will comply with the state's time limits.

Exam and Autopsy

When reasonably necessary, ReliaStar Life may have you or your insured dependent examined while a claim is pending under the Group Policy. ReliaStar Life pays for the initial exam. If not forbidden by state law, ReliaStar Life may have an autopsy made if you or your insured dependent die.

Incontestability

Your and your dependent's insurance has a contestable period starting with the effective date of your insurance and continuing for 2 years while you are living. During that 2 years, ReliaStar Life can contest the validity of your and your dependent's insurance because of inaccurate or false information received relating to your and your insured dependent's insurability. Only statements that are in writing and signed by you or your insured dependent can be used to contest the insurance.

DEFINITIONS

Accident, Accidental Injury – bodily injury resulting from a sudden, violent, unexpected and external event. ReliaStar Life considers all injuries received in one accident as one accidental injury. Infection resulting from a cut or wound caused by an accident is also an accidental injury.

Accidental injury does not include poisoning, disease or any other type of infection, except as stated above.

Close Relative – you, your spouse, and a child, brother, sister, or parent of you or your spouse.

Doctor – a person, other than a close relative, licensed to practice medicine in the state in which treatment is received and providing treatment or advice in accordance with the license. State law may require that benefits be paid for professional services of a practitioner other than a medical doctor. If so, the term “doctor” also includes persons recognized as qualified to treat the accidental injury for which claim is made, by the state in which treatment is received.

Group Policy – the written group insurance contract between ReliaStar Life and the Policyholder.

Member – a current member in good standing, or a former member of the Policyholder that was insured under the Policyholder's Group Life Policy immediately prior to their effective date of this coverage under this certificate.

Policyholder – Minnesota Benefit Association

ReliaStar Life – ReliaStar Life Insurance Company, at its Home Office in Minneapolis, Minnesota.

Sickness – any physical illness.

Spouse – the legal husband or wife of a member.

Written, In Writing – signed, dated and received at ReliaStar Life's Home Office in a form ReliaStar Life accepts.

You, Your – a person insured for Member's Insurance under the Group Policy.

