

SERFF Tracking Number: FDLT-126195050 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42688
Company Tracking Number: M-3036
TOI: H02G Group Health - Accident Only Sub-TOI: H02G.000 Health - Accident Only
Product Name: Group Accident Insurance
Project Name/Number: Group Accident Insurance/M-3036

Filing at a Glance

Company: Fidelity Security Life Insurance Company

Product Name: Group Accident Insurance SERFF Tr Num: FDLT-126195050 State: ArkansasLH
TOI: H02G Group Health - Accident Only SERFF Status: Closed State Tr Num: 42688
Sub-TOI: H02G.000 Health - Accident Only Co Tr Num: M-3036 State Status: Approved-Closed
Filing Type: Form Co Status: Reviewer(s): Rosalind Minor
Authors: Tara Wilson, Kelly Disposition Date: 06/25/2009
Humiston, Teresa Saling, Janice
Garmon, Jennifer Glaser
Date Submitted: 06/18/2009 Disposition Status: Approved-Closed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Group Accident Insurance
Project Number: M-3036
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 06/25/2009

Deemer Date:

Filing Description:

RE: Fidelity Security Life Insurance Company

NAIC #71870 FEIN #43-0949844

Group Accident Insurance

Policyholder: National Associated Buying Services Association

M-3036 Policy

Status of Filing in Domicile: Authorized
Date Approved in Domicile: 04/30/2009
Domicile Status Comments:
Market Type: Group
Group Market Size: Small and Large
Group Market Type: Association
Explanation for Other Group Market Type:
State Status Changed: 06/25/2009
Corresponding Filing Tracking Number:

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C-3036 Certificate
A-01101 Group Application
A-01102 Enrollment Form

We respectfully submit the above referenced forms and group for your review and approval. These forms are new and do not replace any forms previously filed with your state.

These forms will be sold via agent one-on-one solicitations to National Associated Buying Services Association. The group is situated in Texas.

This product provides specific occupational and non-occupational accident benefits as elected by the Policyholder. It includes Accidental Death and Dismemberment, Accident Temporary Total Disability, Accident Permanent and Total Disability and Accident Medical Expense Benefits.

Variable information is indicated by brackets { }. The variables are to be read as though the phrase is in, out, or the choices shown. The variables will not be adjusted to be less favorable than your state allows.

If you have questions or need additional information, please do not hesitate to contact me at 1-800-648-8624 (extension 1267) or e-mail me at jgarmon@fslins.com.

Company and Contact

Filing Contact Information

Janice Garmon, Contract Analyst
3130 Broadway
Kansas City, MO 64111-2406

jgarmon@fslins.com
(800) 648-8624 [Phone]
(816) 751-6026[FAX]

Filing Company Information

Fidelity Security Life Insurance Company
3130 Broadway
Kansas City, MO 64111-2406
(800) 648-8624 ext. [Phone]

CoCode: 71870
Group Code: 451
Group Name:
FEIN Number: 43-0949844

State of Domicile: Missouri
Company Type: Life & Health
State ID Number:

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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Fidelity Security Life Insurance Company	\$50.00	06/18/2009	28668361

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/25/2009	06/25/2009

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	06/19/2009	06/19/2009	Janice Garmon	06/24/2009	06/24/2009

SERFF Tracking Number: *FDLT-126195050* *State:* *Arkansas*
Filing Company: *Fidelity Security Life Insurance Company* *State Tracking Number:* *42688*
Company Tracking Number: *M-3036*
TOI: *H02G Group Health - Accident Only* *Sub-TOI:* *H02G.000 Health - Accident Only*
Product Name: *Group Accident Insurance*
Project Name/Number: *Group Accident Insurance/M-3036*

Disposition

Disposition Date: 06/25/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *FDLT-126195050* State: *Arkansas*
 Filing Company: *Fidelity Security Life Insurance Company* State Tracking Number: *42688*
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 Project Name/Number: *Group Accident Insurance/M-3036*

Item Type	Item Name	Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Articles of Incorporation and By-laws	Approved-Closed	Yes
Supporting Document	Life Information WEB Content Overview	Approved-Closed	Yes
Supporting Document	NABS Lifestyle Description	Approved-Closed	Yes
Supporting Document	Wellness Resources for NABS Members	Approved-Closed	Yes
Form	Group Accident Policy	Approved-Closed	Yes
Form	Group Accident Certificate	Approved-Closed	Yes
Form	Group Application	Approved-Closed	Yes
Form	Enrollment Form	Approved-Closed	Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/19/2009
Submitted Date 06/19/2009
Respond By Date

Dear Janice Garmon,

This will acknowledge receipt of the captioned filing.

Objection 1

- Articles of Incorporation and By-laws (Supporting Document)

Comment:

In order for our Department to continue our review of the association, it is requested that you answer/submit the information outlined in the attached questionnaire.

It is noted that some of the information has been attached to this filing.

Thank you for your cooperation in this matter.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

We have received your filing regarding the above named association/ discretionary group. To determine if this organization is a qualified group under our statutes, please provide the answers to the following questions:

1. Name and address of the group.
2. Is this group incorporated? If so, give state of incorporation.
3. Is there a current office in Arkansas?
4. Does the Arkansas part of the organization have any officers, committees, or chapters? If so, give details.
5. Are annual dues charged? If so, specify amount.
6. What are the specific activities of the organization?
7. What benefits are provided to the members in addition to insurance?
PLEASE ATTACH BROCHURES ON THE BENEFITS.
8. What qualifies an individual for membership?
9. How are members recruited? If by mailing list, advise the source of this list.
10. Attach a copy of the organization by-laws.
11. Also, enclose a list of dues paying members residing in Arkansas with full addresses. If the organization considers this privileged information, we will treat it as such and once it has served our purpose, it will be destroyed.
12. Please attach a copy of the organization's most recent financial statement.
13. Does the organization receive any compensation of any kind from the insurer issuing contracts to its members?

Approval of the organization as a qualified group for insurance purposes will be determined upon receipt of your reply.

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/24/2009
Submitted Date 06/24/2009

Dear Rosalind Minor,

Comments:

Thank you for your response dated 6/19/2009.

Response 1

Comments: 1. National Associated Buying services Association. 6509 Windcrest Drive, Suite 200, Plano, Texas 75024.

2. Yes, the group is incorporated in the state of Texas.

3. There is not a current office in Arkansas.

4. There are not no officers, committees or chapters in Arkansas.

5. There are no annual dues. Monthly dues are \$5 per member.

6. Please See Article 1.02. The fostering and promoting of education and research concerning the advantages and availability of suitable discounted medical, medically related, non-medical and other benefit and service programs in respect of its members; the collection and dissemination of statistics and other relevant and reliable information, facts and data concerning the benefits, medical issues and other related matters; the location and determination of suitable and appropriate benefits, media and other related products and services needed and desired by member at efficient and reasonable costs; the providing of emails, internet websites, media, newsletters, conferences, meetings, seminars, forums and other means of effective communication to members and others concerning the purpose of the corporation and enhancing consumer awareness by providing information related to health, wellness, the environment and other human issues which make a difference in our world.

7. The Association provides "Life Information" which includes information on Health Care topics, Behavioral Health topics, Wellness issues, Aging issues, Government Agencies and Family Issues. It also includes Weekly Wellness Wires, Ask-a Professional email service, and a national database of providers that members can access. In addition, the Association provides access to several discount programs, such as Prescription Drugs, Vitamins, hearing supplies and diabetic supplies. A copy of the Association's benefits is attached.

8. Please See Article 3.01. Membership is open to any individual consumer who is a citizen or resident alien of the U.S., is at least 18 years old with a valid U.S. taxpayer identification number and subscribes to the purposes of the corporation. Members shall have a shared or common interest of having a need for the education, benefits and/or services offered through the Association and shall adhere to the principles and objectives of the Association. The spouse and/or dependents of an active member may also be eligible for optional family membership benefits through the active member.

9. Members are recruited through trucking companies.

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10. The bylaws are attached.

11. There are no current members in Arkansas.

12. The Association does not have a financial statement. A bank statement is attached for your reference.

13. The Association does not receive any compensation from Fidelity Security Life Insurance Company.

Related Objection 1

Applies To:

- Articles of Incorporation and By-laws (Supporting Document)

Comment:

In order for our Department to continue our review of the association, it is requested that you answer/submit the information outlined in the attached questionnaire.

It is noted that some of the information has been attached to this filing.

Thank you for your cooperation in this matter.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Life Information WEB Content Overview

Comment: See Attached.

Satisfied -Name: NABS Lifestyle Description

Comment: See Attached.

Satisfied -Name: Wellness Resources for NABS Members

Comment: See Attached.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

If you need any additional information, please let me know.

Sincerely,

Janice Garmon, Jennifer Glaser, Kelly Humiston, Tara Wilson, Teresa Saling

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Form Schedule

Lead Form Number: M-3036

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	M-3036	Policy/Cont	Group Accident ract/Fratern Policy al Certificate	Initial		50	M-3036.pdf
Approved-Closed	C-3036	Certificate	Group Accident Certificate	Initial		50	C-3036.pdf
Approved-Closed	A-01101	Application/	Group Application Enrollment Form	Initial		50	A-01101.pdf
Approved-Closed	A-01102	Application/	Enrollment Form Enrollment Form	Initial		50	A-01102.pdf



FIDELITY SECURITY LIFE INSURANCE COMPANY

3130 Broadway
Kansas City, Missouri 64111-2406
Phone 800-648-8624
A STOCK COMPANY
(Herein Called "the Company")

{POLICY NUMBER:	{AC-###}	}
{POLICYHOLDER:	{"ABC" Association}	}
{STATE OF ISSUE:	{Various}	}
{POLICY EFFECTIVE DATE:	{Month Day, Year}	}
{POLICY ANNIVERSARY DATE:	{Month Day, Year, and each Month Day thereafter}	}

Fidelity Security Life Insurance Company ("the Company") agrees to pay the benefits provided by the Policy in accordance with its terms and conditions.

The Policy is issued in consideration of the application of the Policyholder (a copy of which is attached) and receipt by the Company of the premiums.

All periods of time under the Policy begin and end at 12:01 A.M. Local Time at the Policyholder's business address.

The Policy may be modified by mutual agreement between the Policyholder and the Company.

The Policy is issued by Fidelity Security Life Insurance Company at Kansas City, Missouri on the Policy Effective Date.

FIDELITY SECURITY LIFE INSURANCE COMPANY


President


Secretary

IMPORTANT NOTICE: THIS COVERAGE IS NOT WORKERS' COMPENSATION COVERAGE AND IS NOT A SUBSTITUTION FOR WORKERS' COMPENSATION COVERAGE.

**GROUP ACCIDENT INSURANCE POLICY
THIS IS A LIMITED BENEFIT POLICY
Please read the Policy carefully.**

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SCHEDULE OF BENEFITS

{Combined Single Limit {(applies to Occupational Benefits only)}	{\$300,000 – \$2,000,000}}
{Occupational Accidental Death and Dismemberment Benefit	
Principal Sum	{ \$10,000 – \$250,000 } { 10 times Average Annual Earnings to a maximum of \$250,000 }
{Loss of Life	
Lump Sum	{ \$25,000 – \$100,000 }
Monthly Installment	1% of remaining Principal Sum
Monthly Installment Payment Period	100 months }
{Non-occupational Accidental Death and Dismemberment Benefit	
Principal Sum	{ 5,000 – \$25,000 }
{Occupational Accident Medical Expense Benefit	
Commencement Period	{ 30 – 180 } days
Benefit Period	{ 52 } { 104 } weeks
Deductible	{ \$0 – \$5,000 }
Maximum Benefit for Occupational Accident Medical Expense Benefit per Insured, per Injury	{ \$300,000 – \$2,000,000 }
{*Maximum Benefit for Manipulation Therapy per Insured, per Injury	{ \$500 – \$2,000 }
{*Maximum Benefit for Physical Therapy per Insured, per Injury	{ 10 – 30 } visits }
{*Subject to the Maximum Benefit for Occupational Accident Medical Expense Benefit. }	
{Non-occupational Accident Medical Expense Benefit	
Commencement Period	{ 30 – 180 } days
Benefit Period	{ 52 } { 104 } weeks
Deductible	{ \$0 – \$500 }
Maximum Benefit for Non-occupational Accident Medical Expense Benefit per Insured, per Injury	{ \$5,000 – \$25,000 }
{*Maximum Benefit for Manipulation Therapy per Insured, per Injury	{ \$500 – \$2,000 }
{*Maximum Benefit for Physical Therapy per Insured, per Injury	{ 10 – 30 } visits }
{*Subject to the Maximum Benefit for Non-occupational Accident Medical Expense Benefit. }	
{Occupational Temporary Total Disability Benefit	
Commencement Period	{ 30 – 180 } days
Waiting Period	7 Days
Benefit Period	{ 52 } { 104 } Weeks
Maximum Weekly Benefit	{ { 70% } { 75% } of the Average Weekly Earnings up to a maximum of { \$150 – \$1,000 } per week }
	{ { \$150 – \$1,000 } per week }

{Occupational Permanent Total Disability Benefit

Maximum Benefit

{\$10,000 – \$250,000} {10 times Average Annual Earnings to a maximum of \$250,000}

{Lump Sum

100% of the Occupational Permanent Total Disability Maximum Benefit}

{Monthly Installment

1% of Occupational Permanent Total Disability Maximum Benefit

Monthly Installment Payment Period

100 months}}

DEFINITIONS

Accident means a sudden, distinct and unplanned event that 1) takes place abruptly and without expectation; 2) occurs at a specifically identifiable time and place; 3) occurs while the Insured's coverage under the Policy is in force; and 3) results in Injury. An Accident does not include an event or occurrence that continues, progresses, or develops.

Actively at Work means the Insured is actively performing for at least 15 hours per week the Usual and Customary Activities of the Insured's occupation as shown in the Insured's application.

Age means the Insured's age on the Insured's last birthday.

Average Weekly Earnings means the Insured's Net Income for the preceding 52 week period divided by 52. "Net Income" means the Insured's income from the Insured's occupation as stated in the Insured's application after business expenses.

If the Insured's occupation stated on the Insured's application was not essentially the same for the full 52 weeks prior to the date the Insured becomes Totally Disabled, earnings will be calculated on a pro rata basis from the most recent verifiable income records pertaining to the occupation stated on the Insured's application.

Average Annual Earnings means the Average Weekly Earnings times 52.

Beneficiary means the person or entity named on the Company's records to receive the benefit after the Insured dies. The Insured may name any person as Beneficiary. If two or more Beneficiaries are named, each will receive an equal portion of the benefit, unless the Insured designates otherwise.

The Insured may change the Beneficiary at any time on forms the Company provides, unless an irrevocable Beneficiary is named or the insurance is assigned. The change date is the date the written request is signed by the Insured. If the Company pays the benefit before the Company receives a change request, the Company is released from further liability under the Policy to the extent of the Company's payment. If the Beneficiary dies at the same time as the Insured, or within 15 days after the Insured dies, the Company will pay the benefits as if the Insured survived the Beneficiary.

If there is no designated Beneficiary when the Insured dies, the Company will pay the benefits to the first of the following living persons:

1. the Insured's spouse;
2. the Insured's children, equally;
3. the Insured's parents, equally; or
4. the Insured's brothers and sisters, equally.

If none of the above persons is living on the date of the Insured's death, the Company will pay the benefits to the Insured's estate.

Benefit Period means for the Temporary Total Disability Benefit, the maximum period of time benefits will be payable. For the Accident Medical Expense Benefit, Benefit Period means the period of time during which covered expenses can be incurred under the Policy. The Benefit Period is shown in the Schedule of Benefits.

Combined Single Limit means the total amount of benefits that are payable under the Policy for an Insured for an Injury or Injuries sustained as a result of any one Accident. The Combined Single Limit is shown in the Schedule of Benefits.

Commencement Period means, for the Temporary Total Disability benefit, the period of time within which a Total Disability must begin after the date the Accident occurred. For the Accident Medical Expense Benefit, Commencement Period means the period of time after the Accident occurred within which the Insured must first receive treatment from a Physician for an Injury caused by such Accident. The Commencement Period is shown in the Schedule of Benefits.

Confined/Confinement means the Insured is admitted to a facility as an Inpatient. The Confinement must be Medically Necessary and be ordered by a Physician.

Confinement does not include treatment received in a Hospital emergency room, the Outpatient department of a Hospital or skilled nursing facility.

Contract Carrier means the organization shown in the Insured's application with whom the Insured has contracted to perform specific services.

Effective Date means for the Insured the date the Insured's coverage under the Policy became effective.

Extended Care Facility means a medical institution operating pursuant to law that provides prolonged care, including, but not limited to, skilled nursing care and related services, and physical therapy services. The Extended Care Facility must meet the following requirements:

1. has facilities for 10 or more patients to stay as Inpatients;
2. is under the supervision of a Physician and Registered Nurses; and
3. maintains clinical records on all patients.

Home Health Care means nursing care and treatment of an Insured in the Insured's home as part of an overall extended treatment plan. To qualify, the plan must:

1. be established and approved in writing by the attending Physician;
2. be provided by a Hospital certified to provide Home Health Care services or by a certified Home Health Care agency;
3. commence within seven days of discharge from a Hospital; and
4. be preceded by a Hospital confinement of seven days or more.

Hospital means an institution that meets all the following requirements:

1. it must be operating according to law;
2. it must give 24-hour medical care, diagnosis and treatment to the sick or injured on an Inpatient basis;
3. it must provide diagnostic and surgical facilities supervised by Physicians;
4. Registered Nurses must be on 24-hour call or duty; and
5. the care must be given either on the Hospital's premises or in facilities available to the Hospital on a pre-arranged basis.

Hospital does not mean a convalescent, nursing, rest or Extended Care Facility or a facility operating exclusively for treatment of the aged, drug addict or alcoholic, even though such facility is operating as a separate institution by a Hospital.

Immediate Family means the Insured or the Insured's spouse, parent, child, grandparent, brother, sister, in-law or any person residing with the Insured.

Injury means bodily harm suffered by the Insured which is the direct result of an Accident. The Injury must be involuntary and direct and independent of all other causes. An Injury does not include harm resulting from Sickness or bodily infirmity.

Inpatient means that the Insured is a registered bed patient in a Hospital for more than 23 continuous hours and is charged room and board by the Hospital. The Insured must be in the Hospital on the advice of a Physician and under the regular care and treatment of a Physician.

Insured means an independent trucker owner/operator or contract driver of a Contract Carrier whose coverage under the Policy has become effective and has not ended.

Maximum Benefit means the maximum benefit payable under the Policy. The Maximum Benefit is shown in the Schedule of Benefits.

Medically Necessary means that a service or supply is necessary and appropriate for the diagnosis or treatment of an Injury based on generally accepted current medical practice. A service or supply will not be considered Medically Necessary if:

1. it is provided only as a convenience to the Insured or provider;
2. it is not appropriate treatment for the Insured's diagnosis or symptoms;
3. it exceeds (in scope, duration or intensity) that level of care needed to provide safe, adequate and appropriate diagnosis or treatment; or
4. it is part of a plan of treatment that is experimental, unproven or related to a research protocol.

Because any particular Physician may prescribe, order, recommend or approve a service or supply does not, of itself, make the service or supply Medically Necessary.

Nervous or Mental Disorder means a mental or emotional disease or disorder generally denoting one of the following:

1. a disease of the mind or personality, evidenced by abnormal behavior or abnormal behavior symptoms;
2. a disorder of conduct evidenced by socially deviant behavior.

Nervous or Mental Disorder includes only those psychiatric illnesses listed in: a) the Standard Nomenclature of Diseases and Operations of the American Medical Association; or b) the Diagnostic and Statistical Manual for Mental Disorders of the American Psychiatric Association.

Outpatient means the Insured is not an Inpatient when covered services are received.

Physician means a person licensed by the state in which he or she is a resident to practice the healing arts. He or she must be practicing within the scope of his or her license for the service or treatment given. He or she may not be the Insured or a member of the Insured's Immediate Family.

Policy means the contract providing the benefits described herein issued to the Policyholder.

Policyholder means the organization in whose name the Policy is issued.

Reasonable and Customary Charge means a charge that is:

1. not more than is charged when there is no insurance;
2. not more than the charge for similar services or supplies; and
3. the amount charged by a majority of providers in the same Geographic Area for similar services or supplies and/or is relative to the value and worth of similar services.

"Geographic Area" means the city or town where the service or supply is obtained. In large cities, Geographic Area may be a section or sections of the city, if the above criteria can be met. In smaller urban or rural areas, Geographic Area may have to be expanded to include surrounding areas to meet the criteria.

Sickness means a bodily disorder, disease or illness.

Social Security Disability Award means the Insured has been approved for Social Security Disability Insurance benefits and has received an award letter from the Social Security Administration.

Sound Natural Teeth means whole natural teeth that are unaltered or are fully restored to their normal function and are disease-free, have no decay and are not more susceptible to Injury than unaltered natural teeth.

Total Disability/Totally Disabled means that because of Injury:

1. during the first {52 – 104} weeks of disability, the Insured cannot perform the material and substantial duties of the Insured's occupation as stated on the Insured's application. The Insured must be under the care of a Physician, unless the Physician certifies that the Insured does not need the regular care of a Physician.
2. after {52 – 104} weeks of disability, the Insured is completely unable to perform the material and substantial duties of any occupation for which the Insured is reasonably fitted by education, training or experience. The Insured must be under the care of a Physician, unless the Physician certifies that the Insured does not need the regular care of a Physician for such disabling condition.

Usual and Customary Activities means the functions or activities the Insured performs on a routine basis in the performance of the Insured's occupation as stated in the Insured's application. Usual and Customary Activities {does} {does not} include performing routine maintenance on the Insured's tractor or trailer.

Waiting Period means the period of time an Insured must be Totally Disabled under the Policy before benefits are payable. The Waiting Period is shown in the Schedule of Benefits.

ELIGIBILITY AND EFFECTIVE DATE

Eligibility. All members who meet the definition of an eligible class, as shown in the Policyholder's application, are eligible for coverage. New eligible classes may be added from time to time.

Effective Date. An Insured's coverage will be effective on {the {first} {15th} of the month following} the date the Insured becomes eligible for coverage, subject to the Company's receipt of the first premium. In no event will coverage become effective before the Policy Effective Date for any Insured.

If an eligible member is not Actively at Work on the date coverage would otherwise begin; then coverage will begin on {the {first} {15th} of the month following} the date he or she is Actively at Work.

WHEN CHANGES IN COVERAGE OCCUR

Any change in benefits that occurs automatically under the Policy provisions or Schedule of Benefits will become effective {on the {first} {15th} day of the month} coinciding with or next following the date that the status of the Insured has changed.

If any change in benefits or coverage is requested, the change will become effective {as of the {first} {15th} day of the month} coinciding with or next following the date of the Company's approval. If an Insured is not Actively at Work on the date the requested change in coverage would otherwise begin; then the requested change in coverage will begin on {the {first} {15th} of the month following} the date the Insured is Actively at Work.

BENEFITS

Occupational benefits are only payable if the Accident causing the Injury occurred while the Insured was performing the Usual and Customary Activities of the Insured's occupation as stated on the Insured's application. {The Accident must occur while the Insured is away from the Insured's primary residence and on dispatch with a Contract Carrier.}

{Non-occupational benefits are only payable if the Accident causing the Injury did not occur while the Insured was performing the Usual and Customary Activities of the Insured's occupation as stated on the Insured's application.}

{If the Insured is eligible for more than one Occupational benefit for one Accident, the total amount payable cannot exceed the Combined Single Limit shown in the Schedule of Benefits. Occupational benefits will be paid in the following order according to the date the Company receives notice of claim: {Accident Medical Expense Benefit,} {Temporary Total

Disability,} {Accidental Death and Dismemberment Benefit} {and Permanent Total Disability}. If the Company is unable to determine the order of benefits based upon the above, the Company will determine the order of benefit payment without any prejudice to the Insured or any Beneficiary.}

{Occupational {and Non-occupational} Accidental Death and Dismemberment Benefit. If an Insured suffers an Injury that occurs within 365 days of the date of the Accident resulting in a Loss described in the Table of Losses, the Company will pay the benefit described below:

Table of Losses

<u>Loss of {or Loss of Use of}:</u>	<u>Benefit Payable:</u>
Life.....	Principal Sum
Both Hands.....	Principal Sum
Both Feet	Principal Sum
Sight of Both Eyes	Principal Sum
One Hand and One Foot.....	Principal Sum
One Hand and Sight of One Eye.....	Principal Sum
One Foot and Sight of One Eye	Principal Sum
Speech and Hearing in Both Ears.....	Principal Sum
Quadriplegia	Principal Sum
One Hand	½ Principal Sum
One Foot	½ Principal Sum
Sight of One Eye	½ Principal Sum
Speech	½ Principal Sum
Hearing in Both Ears	½ Principal Sum
Paraplegia	½ Principal Sum
Hemiplegia	½ Principal Sum
Thumb and Index Finger of Same Hand.....	¼ Principal Sum

The Principal Sum is shown in the Schedule of Benefits.

If more than one Loss occurs as the result of one Accident, only one amount, the largest, is payable.

{The Loss of Life benefit shown in the Table of Losses will be paid as a lump sum with monthly installments as shown in the Schedule of Benefits. Payment of the Monthly Installment will end on the earlier of:

1. the date the full Principal Sum has been paid; or
2. the date the Beneficiary dies. }

“Loss” means:

1. for a hand, total, complete and permanent severance of the entire hand at or above the wrist joint;
2. for a foot, total, complete and permanent severance of the entire foot at or above the ankle joint;
3. for sight, total and irrecoverable loss of sight;
4. for speech and/or hearing, total and irrecoverable loss of the entire faculty of hearing and/or speech;
5. for quadriplegia, the total continuous and uninterrupted paralysis without severance of both upper and lower limbs as certified by a Physician to be permanent and irreversible;
6. for paraplegia, the total continuous and uninterrupted paralysis without severance of both lower limbs as certified by a Physician to be permanent and irreversible;
7. for hemiplegia, the total continuous and uninterrupted paralysis without severance of both upper and lower limbs on one side of the body as certified by a Physician to be permanent and irreversible; or
8. for thumb and index finger, total, complete and permanent severance through or above the metacarpophalangeal joints.

{“Loss of Use” means the total, irrecoverable and continuous inability to use for 12 consecutive months, and such Loss of Use is determined to be permanent and irrecoverable at the end of such period.}}

{Occupational {and Non-occupational} Accident Medical Expense Benefit. If the Insured receives treatment for an Injury caused by an Accident, the Company will pay the Reasonable and Customary Charge up to the Accident Medical Expense Maximum Benefit shown in the Schedule of Benefits for services and supplies shown below, subject to the following:

1. The treatment must be Medically Necessary;
2. The Insured must receive treatment within the Commencement Period shown in the Schedule of Benefits;
3. The expense must be incurred during the Benefit Period shown in the Schedule of Benefits;
4. The covered service or supply must be prescribed by a Physician; and
5. The Deductible shown in the Schedule of Benefits must be satisfied.

The following services and supplies are covered under the Policy:

1. use of a professional ambulance service for a trip to or from a Hospital;
2. treatment by a Physician for medical care for treatment of an Injury;
3. initial cast, splint, truss, brace, artificial limb and artificial eye, but not replacement of such items;
4. rental of oxygen equipment, Hospital beds, wheelchairs and other durable equipment not to exceed the purchase price of such equipment;
5. medical charges made by a Hospital for Inpatient services, Outpatient services, and emergency room services. Hospital room and board charges are limited to the average semi-private room rate charged by the Hospital. Intensive Care room and board charges are limited to two times the average semi-private room rate charged by the Hospital;
6. care by a qualified nurse, if under the supervision of a registered graduate nurse, for Home Health Care which follows a seven-day period of Hospital Confinement;
7. medical charges made by an Extended Care Facility for Inpatient services which follows a seven-day period of Hospital Confinement, provided the Confinement in the Extended Care Facility results from the need for further and indefinite medical care and the attending Physician certifies the Confinement;
8. Outpatient manipulation therapy treatment up to the Maximum Benefit shown in the Schedule of Benefits;
9. Outpatient physical therapy treatment up to the Maximum Benefit shown in the Schedule of Benefits;
10. prescription drugs that have been prescribed in writing by a Physician; and
11. care, treatment or replacement of Sound Natural Teeth.

For this benefit, “Deductible” means the total amount of expenses incurred for covered services and supplies that the Insured must pay before benefits begin. The Deductible is shown in the Schedule of Benefits.

Exclusions. In addition to the Exclusions and Limitations listed in the Policy, the Accident Medical Expense Benefit will not be paid for charges, services or supplies for:

1. any service or supply provided outside of the United States;
2. prosthetic or orthopedic appliances, except as required for the replacement of natural parts of the body;
3. dental treatment except for the care, treatment or replacement of Sound Natural Teeth;
4. charges for care or services furnished by any agency or program funded by federal, state or local government. This does not apply to Medicaid or where prohibited by law;
5. cosmetic, plastic or restorative surgery unless Medically Necessary for the treatment of an Injury;
6. eye refractions, eyeglasses or contact lenses, or for the cost of a hearing aid;
7. expenses incurred after the Benefit Period;
8. any service or charge for which the Insured is not legally obligated to pay;
9. sales tax or gross receipts tax, or any charges to complete a claim form;
10. transportation costs, other than for emergency ambulance services;
11. custodial, respite, rest or supportive care which does not assist the Insured to recover from an Injury;
12. personal comfort items such as telephone, television or similar services; and
13. expenses incurred which are in excess of the Reasonable and Customary Charge. }

{Occupational Temporary Total Disability Benefit. If Total Disability due to Injury begins during the Commencement Period before the Insured reaches Age 80, the Company will pay the Occupational Temporary Total Disability Benefit up to the Maximum Weekly Benefit Amount up to the Benefit Period shown in the Schedule of Benefits.

Benefits will begin after satisfaction of the Waiting Period shown in the Schedule of Benefits. Benefits will cease on the earlier of:

1. the date the Insured no longer meets the definition of Total Disability;
2. the date the Benefit Period is reached; or
3. the date the Insured dies.

If the Insured is not working in any occupation while disabled, the amount of benefit payable under the Policy will be { the maximum percentage shown in the Schedule of Benefits of the Insured's Average Weekly Earnings on the date the Insured becomes Totally Disabled due to Injury, not to exceed } the Maximum Benefit shown in the Schedule of Benefits.

If the Insured is working while disabled, the amount of benefit payable under the Policy will be {the maximum percentage shown in the Schedule of Benefits of the Insured's Average Weekly Earnings on the date the Insured becomes Totally Disabled due to Injury, not to exceed} the Maximum Benefit shown in the Schedule of Benefits, less any earnings the Insured receives for that work.

If the Insured recovers after part of a week, the Company will pay for the part of the week at a daily rate equal to one-seventh of the Maximum Weekly Benefit.

A Total Disability commencing after the Insured has received benefits under the Policy for a prior Total Disability will be considered a continuation of the prior Total Disability unless:

1. the periods of Total Disability are separated by at least { 14 – 30 } days for which the Insured is Actively at Work; or
2. the periods of Total Disability are due to a separate Accident. }

{Occupational Permanent Total Disability Benefit. If the Insured is Totally Disabled due to an Injury, the Company will pay the Occupational Permanent Total Disability Benefit shown in the Schedule of Benefits if:

1. the benefits payable for the Occupational Temporary Total Disability Benefit ceased solely because the Occupational Temporary Total Disability Benefit Period shown in the Schedule of Benefits has been reached, but the Insured remains Totally Disabled;
2. the Insured is under Age 70 on the date the Benefit Period for Occupational Temporary Total Disability Benefit shown in the Schedule of Benefits has been reached; and
3. the Insured has been granted a Social Security Disability Award for such Total Disability.

The amount payable under the Occupational Permanent Total Disability Benefit will be reduced by any amounts payable under the Accidental Death and Dismemberment benefit payable for the same Accident.

{The amount payable under the Policy will be paid in a lump sum as shown in the Schedule of Benefits.} {The amount payable under the Policy will be paid in monthly installments as shown in the Schedule of Benefits. The monthly installments will end on the earlier of the following:

1. the date the Maximum Benefit is paid;
2. the date the Insured is no longer Totally Disabled;
3. the date the Insured's Social Security Disability Award ceases; or
4. the date the Insured dies.}}

{Exposure and Disappearance. If due to an Accident, the Insured is unavoidably exposed to the natural elements and the Insured would otherwise be eligible for benefits under the Policy, it is presumed that the Insured suffered an Injury and the Company will pay applicable benefits for the coverages provided in the Policy.

If the Insured is involved in an Accident which results in the forced landing, stranding, sinking or wrecking of a conveyance in which the Insured was an occupant and the Insured's body is not located within one year of the date of the Accident, the Company will presume the Insured has died from the Accident, and the Company will pay the Loss of life benefit under the Accidental Death and Dismemberment benefit.}

EXCLUSIONS AND LIMITATIONS

The Policy does not provide any benefits for an Injury from:

1. Sickness, disease or bacterial infection except which results from an Injury or bacterial infections which results from accidental ingestion of contaminated substances;
2. suicide, attempted suicide, intentionally self-inflicted Injury, while sane or insane (in Colorado or Missouri, while sane);
3. any loss sustained by the Insured, for occupational benefits, that results from Injury sustained while the Insured is being transported to or from the Insured's occupation, unless the Insured is being transported in a vehicle that is regularly used by the Insured in the Insured's occupation;
4. any loss caused by the Insured engaging in any act or occupation which is a violation of the law of the jurisdiction where the loss or cause of loss occurred. A violation of law means a felony violation;
5. any loss caused by the Insured's riding or driving in any kind of organized race;
6. any loss for which benefits are provided under any Workers' Compensation Law, Occupational Disease Law, the 4800 Time Benefit Plan or similar legislation;
7. care that is not Medically Necessary;
8. Nervous or Mental Disorders;
9. {Injury as a result of air travel, except,
 - a. as a fare-paying passenger on a commercial airline on a regularly scheduled route; or
 - b. as a passenger for transportation only and not as a pilot or crew member;}
10. war, declared or undeclared; and
11. any loss caused by an Accident that occurs while an Insured has been determined to be intoxicated:
 - a. by judicial or administrative judgment or order;
 - b. by evidence of an alcohol concentration in the Insured's blood, breath or urine which equals or exceeds the limits set by applicable motor vehicle laws; or
 - c. by other evidence demonstrating the Insured was under the influence of any alcohol, narcotic, barbiturate or hallucinatory drug, unless the same was administered on the advice of a Physician and was taken according to the prescribed dosage;and the use of such substance was a proximate cause of the Injury.

TERMINATION OF INSURANCE

Termination of the Policy. The Company may terminate the Policy on {any premium due date} {the first day of any month} {any date} on or after the first Policy Anniversary Date. Written notice must be provided to the Policyholder at least {60-120} days prior to termination. The Policyholder may terminate the Policy on any date. The Policyholder is responsible for notifying each Insured of the termination of the Policy.

Termination of Insured's Coverage under the Policy. The Insured's insurance will cease on the earliest of the following dates:

1. the date the Policy ends {or the date the Contract Carrier is no longer affiliated with the Policyholder};
2. the end of the last period for which any required premium contribution agreed to in writing has been made, subject to the Grace Period provision;
3. the date the Insured attains Age 80;
4. the date the Insured is no longer eligible for insurance.

Termination of the insurance of any Insured will be without prejudice to any claim originating before the date of termination.

PREMIUMS

The Company provides insurance coverage in return for premium payment. Premiums are payable to the Company. The first premium is due on the Policy Effective Date. Subsequent premiums must be paid to the Company on or before the due date. {The initial premium rates are shown in the Policyholder's application.}

Premium Changes. The Company has the right to change the premium rates on any premium due date on or after the first Policy Anniversary Date. The Company will provide written notice at least {60-120} days before the date of change. The premium rates can also be changed at any time the terms of the Policy are changed.

Grace Period. The Policy has a 31-day grace period for the payment of each premium due after the first premium. Coverage will continue in force during the grace period. Coverage will terminate at the end of the grace period if all premiums due are not paid. The Company will require payment of all premiums for the period this coverage continues in force, including the premiums for the grace period. The grace period will not apply if the Company receives written notice of the Policyholder's or the Insured's intent to terminate coverage.

Unpaid Premium. When a claim is paid during the grace period, any premium due and unpaid for the Insured may be deducted from the claim payment.

Waiver of Premium. After the Insured has been Totally Disabled for the Waiting Period shown in the Schedule of Benefits, premiums will be waived while the Insured remains Totally Disabled, not to exceed the Benefit Period. The Insured is responsible for the payment of all premiums due up to the date the Insured is notified by the Company, in writing, of the date the waiver has gone into effect. The coverage will stay in force, without payment of premium, as long as the Insured is Totally Disabled; however, when the Benefit Period ends, the waiver of premium ends. The Insured's premium payments must resume at the next premium due date to continue coverage under the Policy.

After a period during which the Company has waived premium payments, the Insured has the right to resume premium payments as they become due. The Insured's coverage will be subject to all the provisions and conditions of the Policy.

CLAIM PROVISIONS

Notice of Claim. Written notice of claim must be given to the Company within 30 days after a covered loss occurs, or as soon after that as is reasonably possible. Notice must be given by or on behalf of the claimant to the Company {at 3130 Broadway, Kansas City, Missouri 64111}, or to its authorized administrator or to any of the Company's authorized agents. Notice must include the name of the Insured, the Policy Number and the nature of the loss.

Claim Forms. The Company will furnish claim forms to the Insured within 15 days after notice of claim is received. If the Company does not send the forms within that time, the Insured can send written proof of the occurrence, character and extent of loss for which the claim is made, within the time stated in the Policy for filing proof of loss.

Proof of Loss. Written proof of loss must be furnished to the Company at the Company's home office within 90 days after the date of the loss. Failure to furnish proof within the time required will not invalidate or reduce any claim if it was not reasonably possible to give proof within that time, if the proof is furnished as soon as reasonably possible. In no event, except in the absence of legal capacity, will proof of loss be accepted later than one year from the time proof is required.

Time Payment of Claims. Any benefit payable under the Policy will be paid immediately, but not more than 30 days, upon receipt of due written proof of loss.

Payment of Claims. All benefits will be payable to the Insured, unless assigned. Any benefits payable on or after the Insured's death will be paid to the Beneficiary.

If any benefit is payable to an estate or to a minor or person not otherwise competent to give a valid release, the Company may pay such benefit, up to the amount allowed by the law of the state in which the minor or incompetent resides. Such payment will be made to the legal guardian of the minor or incompetent. Any payment made by the Company in good faith under this provision will fully discharge the Company to the extent of the payment.

Physical Examination and Autopsy. The Company, at the Company's expense, will have the right and opportunity to examine any Insured for whom a claim is pending when and as often as it may reasonably be required during the pendency of a claim. The Company, at the Company's expense, will have the right to make an autopsy in case of death, unless it is prohibited by law.

Legal Actions. No Insured can bring an action at law or in equity to recover on the Policy until more than 60 days after the date written proof of loss has been furnished according to the Policy. No such action may be brought after the expiration of three years (six years in Alabama and South Carolina; five years in Kansas) after the time written proof of loss is required to be furnished. If the time limit of the Policy is less than allowed by the laws of the state where the Insured lives, the limit is extended to meet the minimum time allowed by such law.

GENERAL PROVISIONS

Certificates. A Certificate will be provided to the Insured. The Certificate will describe the coverage provided, to whom benefits are paid and the provisions of the Policy that apply to the Insured. The Certificate is not a part of the Policy. Any conflict between the terms of the Certificate and the Policy will be decided in favor of the Policy. A copy of the Policy may be examined at the office of the Policyholder.

Clerical Error. Clerical errors or delays in keeping records for the Policy will not deny insurance that would otherwise have been granted, nor extend insurance that otherwise would have ceased and call for a fair adjustment of premium and benefits to correct the error.

Conformity to Law. Any provision of the Policy that is in conflict with the laws of the state in which it is issued is amended to conform with the laws of that state.

Entire Contract. The entire contract between the parties includes the Policy, any endorsement and riders, the Policyholder's application (that is attached to the Policy when issued) and the Insured's individual enrollment form, if any. All statements made by the Policyholder or an Insured will, in the absence of fraud, be deemed representations and not warranties, and no such statement will be used in defense of a claim hereunder unless it is contained in a written instrument signed by the Policyholder, the Insured, the Insured's Beneficiary or personal representative, a copy of which has been furnished to the Policyholder, the Insured, the Insured's Beneficiary or personal representative.

Amendments and Changes. No agent is authorized to alter or amend the Policy, or to waive any conditions or restrictions herein, or to extend the time for paying a premium. The Policy and the Certificate may be amended at any time, in writing, by mutual agreement between the Policyholder and the Company without the consent of the Insured, but without prejudice to any loss incurred prior to the effective date of the amendment. No person except an Officer of the Company has authority on behalf of the Company to modify the Policy or to waive or lapse any of the Company's rights or requirements.

Incontestability. After the Policy has been in force for two years, it can only be contested for nonpayment of premiums. No statement made by an Insured can be used in a contest after the Insured's insurance has been in force for two years during the Insured's lifetime. No statement an Insured makes can be used in a contest unless it is in writing and signed by the Insured.

Insurance Data. The Policyholder must give the Company the names of all individuals insured. The names of persons who later become insured and the names of those who cease to be eligible must also be given. The eligibility dates and any other necessary data must be given to the Company so that the premium can be determined.

The Company has the right to audit the Policyholder's books and records as they relate to this insurance. The Company can authorize someone else to perform the audit. Any such inspection may be done at any reasonable time.

Misstatement Of {Sex Or} Age. If relevant facts about the Insured were not accurate:

1. an adjustment of premium will be made; and
2. the true facts will decide what amount of insurance is valid under the Policy.

{Multiple Certificates. The Insured is not eligible for coverage under more than one Certificate providing accident coverage under group policies issued by the Company to the Policyholder. If premium is being paid for more than one Certificate, coverage will be in effect under only one Certificate at any one time and premiums paid for Certificates that are not in effect will be refunded. }

Workers' Compensation. The Policy is not a Workers' Compensation policy. The Policy does not satisfy any requirement for coverage by Workers' Compensation Insurance.



FIDELITY SECURITY LIFE INSURANCE COMPANY

3130 Broadway
Kansas City, Missouri 64111-2406
Phone 800-648-8624
A STOCK COMPANY
(Herein Called "the Company")

{POLICY NUMBER:} {###}
{POLICYHOLDER:} {"ABC" Employer}
{POLICY EFFECTIVE DATE:} {Month Day, Year}

The Certificate is issued to Insureds of the {above} Policyholder whose coverage is in effect according to the Company's records.

The Certificate describes the principal provisions of the Policy. Benefits are provided only while coverage is in force for an Insured Person according to the terms of the Policy.

All periods of insurance begin and end at 12:01 a.m. Local Time at the Policyholder's business address.

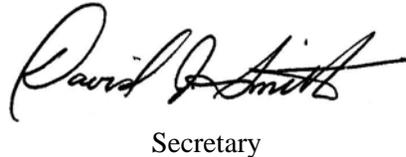
This Certificate replaces all certificates that may have been previously issued to the Insured under the Policy.

The Policy may be amended, changed, cancelled or discontinued without the consent of any Insured Person.

The Policy is issued by Fidelity Security Life Insurance Company at Kansas City, Missouri on the Policy Effective Date.

FIDELITY SECURITY LIFE INSURANCE COMPANY


President


Secretary

IMPORTANT NOTICE: THIS COVERAGE IS NOT WORKERS' COMPENSATION COVERAGE AND IS NOT A SUBSTITUTION FOR WORKERS' COMPENSATION COVERAGE.

**GROUP ACCIDENT INSURANCE CERTIFICATE
THIS IS A LIMITED BENEFIT CERTIFICATE
Please read the Certificate carefully.**

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SCHEDULE OF BENEFITS

{Combined Single Limit {(applies to Occupational Benefits only)}	{\$300,000 – \$2,000,000}}
{Occupational Accidental Death and Dismemberment Benefit	
Principal Sum	{ \$10,000 – \$250,000 } { 10 times Average Annual Earnings to a maximum of \$250,000 }
{Loss of Life	
Lump Sum	{ \$25,000 – \$100,000 }
Monthly Installment	1% of remaining Principal Sum
Monthly Installment Payment Period	100 months }
{Non-occupational Accidental Death and Dismemberment Benefit	
Principal Sum	{ 5,000 – \$25,000 }
{Occupational Accident Medical Expense Benefit	
Commencement Period	{ 30 – 180 } days
Benefit Period	{ 52 } { 104 } weeks
Deductible	{ \$0 – \$5,000 }
Maximum Benefit for Occupational Accident Medical Expense Benefit per Insured, per Injury	{ \$300,000 – \$2,000,000 }
{*Maximum Benefit for Manipulation Therapy per Insured, per Injury	{ \$500 – \$2,000 }
{*Maximum Benefit for Physical Therapy per Insured, per Injury	{ 10 – 30 } visits }
{*Subject to the Maximum Benefit for Occupational Accident Medical Expense Benefit. }	
{Non-occupational Accident Medical Expense Benefit	
Commencement Period	{ 30 – 180 } days
Benefit Period	{ 52 } { 104 } weeks
Deductible	{ \$0 – \$500 }
Maximum Benefit for Non-occupational Accident Medical Expense Benefit per Insured, per Injury	{ \$5,000 – \$25,000 }
{*Maximum Benefit for Manipulation Therapy per Insured, per Injury	{ \$500 – \$2,000 }
{*Maximum Benefit for Physical Therapy per Insured, per Injury	{ 10 – 30 } visits }
{*Subject to the Maximum Benefit for Non-occupational Accident Medical Expense Benefit. }	
{Occupational Temporary Total Disability Benefit	
Commencement Period	{ 30 – 180 } days
Waiting Period	7 Days
Benefit Period	{ 52 } { 104 } Weeks
Maximum Weekly Benefit	{ { 70% } { 75% } of the Average Weekly Earnings up to a maximum of { \$150 – \$1,000 } per week }
	{ { \$150 – \$1,000 } per week }

{Occupational Permanent Total Disability Benefit

Maximum Benefit

{\$10,000 – \$250,000} {10 times Average Annual Earnings to a maximum of \$250,000}

{Lump Sum

100% of the Occupational Permanent Total Disability Maximum Benefit}

{Monthly Installment

1% of Occupational Permanent Total Disability Maximum Benefit

Monthly Installment Payment Period

100 months}}

DEFINITIONS

Accident means a sudden, distinct and unplanned event that 1) takes place abruptly and without expectation; 2) occurs at a specifically identifiable time and place; 3) occurs while the Insured's coverage under the Policy is in force; and 3) results in Injury. An Accident does not include an event or occurrence that continues, progresses, or develops.

Actively at Work means the Insured is actively performing for at least 15 hours per week the Usual and Customary Activities of the Insured's occupation as shown in the Insured's application.

Age means the Insured's age on the Insured's last birthday.

Average Weekly Earnings means the Insured's Net Income for the preceding 52 week period divided by 52. "Net Income" means the Insured's income from the Insured's occupation as stated in the Insured's application after business expenses.

If the Insured's occupation stated on the Insured's application was not essentially the same for the full 52 weeks prior to the date the Insured becomes Totally Disabled, earnings will be calculated on a pro rata basis from the most recent verifiable income records pertaining to the occupation stated on the Insured's application.

Average Annual Earnings means the Average Weekly Earnings times 52.

Beneficiary means the person or entity named on the Company's records to receive the benefit after the Insured dies. The Insured may name any person as Beneficiary. If two or more Beneficiaries are named, each will receive an equal portion of the benefit, unless the Insured designates otherwise.

The Insured may change the Beneficiary at any time on forms the Company provides, unless an irrevocable Beneficiary is named or the insurance is assigned. The change date is the date the written request is signed by the Insured. If the Company pays the benefit before the Company receives a change request, the Company is released from further liability under the Policy to the extent of the Company's payment. If the Beneficiary dies at the same time as the Insured, or within 15 days after the Insured dies, the Company will pay the benefits as if the Insured survived the Beneficiary.

If there is no designated Beneficiary when the Insured dies, the Company will pay the benefits to the first of the following living persons:

1. the Insured's spouse;
2. the Insured's children, equally;
3. the Insured's parents, equally; or
4. the Insured's brothers and sisters, equally.

If none of the above persons is living on the date of the Insured's death, the Company will pay the benefits to the Insured's estate.

Benefit Period means for the Temporary Total Disability Benefit, the maximum period of time benefits will be payable. For the Accident Medical Expense Benefit, Benefit Period means the period of time during which covered expenses can be incurred under the Policy. The Benefit Period is shown in the Schedule of Benefits.

Combined Single Limit means the total amount of benefits that are payable under the Policy for an Insured for an Injury or Injuries sustained as a result of any one Accident. The Combined Single Limit is shown in the Schedule of Benefits.

Commencement Period means, for the Temporary Total Disability benefit, the period of time within which a Total Disability must begin after the date the Accident occurred. For the Accident Medical Expense Benefit, Commencement Period means the period of time after the Accident occurred within which the Insured must first receive treatment from a Physician for an Injury caused by such Accident. The Commencement Period is shown in the Schedule of Benefits.

Confined/Confinement means the Insured is admitted to a facility as an Inpatient. The Confinement must be Medically Necessary and be ordered by a Physician.

Confinement does not include treatment received in a Hospital emergency room, the Outpatient department of a Hospital or skilled nursing facility.

Contract Carrier means the organization shown in the Insured's application with whom the Insured has contracted to perform specific services.

Effective Date means for the Insured the date the Insured's coverage under the Policy became effective.

Extended Care Facility means a medical institution operating pursuant to law that provides prolonged care, including, but not limited to, skilled nursing care and related services, and physical therapy services. The Extended Care Facility must meet the following requirements:

1. has facilities for 10 or more patients to stay as Inpatients;
2. is under the supervision of a Physician and Registered Nurses; and
3. maintains clinical records on all patients.

Home Health Care means nursing care and treatment of an Insured in the Insured's home as part of an overall extended treatment plan. To qualify, the plan must:

1. be established and approved in writing by the attending Physician;
2. be provided by a Hospital certified to provide Home Health Care services or by a certified Home Health Care agency;
3. commence within seven days of discharge from a Hospital; and
4. be preceded by a Hospital confinement of seven days or more.

Hospital means an institution that meets all the following requirements:

1. it must be operating according to law;
2. it must give 24-hour medical care, diagnosis and treatment to the sick or injured on an Inpatient basis;
3. it must provide diagnostic and surgical facilities supervised by Physicians;
4. Registered Nurses must be on 24-hour call or duty; and
5. the care must be given either on the Hospital's premises or in facilities available to the Hospital on a pre-arranged basis.

Hospital does not mean a convalescent, nursing, rest or Extended Care Facility or a facility operating exclusively for treatment of the aged, drug addict or alcoholic, even though such facility is operating as a separate institution by a Hospital.

Immediate Family means the Insured or the Insured's spouse, parent, child, grandparent, brother, sister, in-law or any person residing with the Insured.

Injury means bodily harm suffered by the Insured which is the direct result of an Accident. The Injury must be involuntary and direct and independent of all other causes. An Injury does not include harm resulting from Sickness or bodily infirmity.

Inpatient means that the Insured is a registered bed patient in a Hospital for more than 23 continuous hours and is charged room and board by the Hospital. The Insured must be in the Hospital on the advice of a Physician and under the regular care and treatment of a Physician.

Insured means an independent trucker owner/operator or contract driver of a Contract Carrier whose coverage under the Policy has become effective and has not ended.

Maximum Benefit means the maximum benefit payable under the Policy. The Maximum Benefit is shown in the Schedule of Benefits.

Medically Necessary means that a service or supply is necessary and appropriate for the diagnosis or treatment of an Injury based on generally accepted current medical practice. A service or supply will not be considered Medically Necessary if:

1. it is provided only as a convenience to the Insured or provider;
2. it is not appropriate treatment for the Insured's diagnosis or symptoms;
3. it exceeds (in scope, duration or intensity) that level of care needed to provide safe, adequate and appropriate diagnosis or treatment; or
4. it is part of a plan of treatment that is experimental, unproven or related to a research protocol.

Because any particular Physician may prescribe, order, recommend or approve a service or supply does not, of itself, make the service or supply Medically Necessary.

Nervous or Mental Disorder means a mental or emotional disease or disorder generally denoting one of the following:

1. a disease of the mind or personality, evidenced by abnormal behavior or abnormal behavior symptoms;
2. a disorder of conduct evidenced by socially deviant behavior.

Nervous or Mental Disorder includes only those psychiatric illnesses listed in: a) the Standard Nomenclature of Diseases and Operations of the American Medical Association; or b) the Diagnostic and Statistical Manual for Mental Disorders of the American Psychiatric Association.

Outpatient means the Insured is not an Inpatient when covered services are received.

Physician means a person licensed by the state in which he or she is a resident to practice the healing arts. He or she must be practicing within the scope of his or her license for the service or treatment given. He or she may not be the Insured or a member of the Insured's Immediate Family.

Policy means the contract providing the benefits described herein issued to the Policyholder.

Policyholder means the organization in whose name the Policy is issued.

Reasonable and Customary Charge means a charge that is:

1. not more than is charged when there is no insurance;
2. not more than the charge for similar services or supplies; and
3. the amount charged by a majority of providers in the same Geographic Area for similar services or supplies and/or is relative to the value and worth of similar services.

"Geographic Area" means the city or town where the service or supply is obtained. In large cities, Geographic Area may be a section or sections of the city, if the above criteria can be met. In smaller urban or rural areas, Geographic Area may have to be expanded to include surrounding areas to meet the criteria.

Sickness means a bodily disorder, disease or illness.

Social Security Disability Award means the Insured has been approved for Social Security Disability Insurance benefits and has received an award letter from the Social Security Administration.

Sound Natural Teeth means whole natural teeth that are unaltered or are fully restored to their normal function and are disease-free, have no decay and are not more susceptible to Injury than unaltered natural teeth.

Total Disability/Totally Disabled means that because of Injury:

1. during the first {52 – 104} weeks of disability, the Insured cannot perform the material and substantial duties of the Insured's occupation as stated on the Insured's application. The Insured must be under the care of a Physician, unless the Physician certifies that the Insured does not need the regular care of a Physician.
2. after {52 – 104} weeks of disability, the Insured is completely unable to perform the material and substantial duties of any occupation for which the Insured is reasonably fitted by education, training or experience. The Insured must be under the care of a Physician, unless the Physician certifies that the Insured does not need the regular care of a Physician for such disabling condition.

Usual and Customary Activities means the functions or activities the Insured performs on a routine basis in the performance of the Insured's occupation as stated in the Insured's application. Usual and Customary Activities {does} {does not} include performing routine maintenance on the Insured's tractor or trailer.

Waiting Period means the period of time an Insured must be Totally Disabled under the Policy before benefits are payable. The Waiting Period is shown in the Schedule of Benefits.

ELIGIBILITY AND EFFECTIVE DATE

Eligibility. All members who meet the definition of an eligible class, as shown in the Policyholder's application, are eligible for coverage. New eligible classes may be added from time to time.

Effective Date. An Insured's coverage will be effective on {the {first} {15th} of the month following} the date the Insured becomes eligible for coverage, subject to the Company's receipt of the first premium. In no event will coverage become effective before the Policy Effective Date for any Insured.

If an eligible member is not Actively at Work on the date coverage would otherwise begin; then coverage will begin on {the {first} {15th} of the month following} the date he or she is Actively at Work.

WHEN CHANGES IN COVERAGE OCCUR

Any change in benefits that occurs automatically under the Policy provisions or Schedule of Benefits will become effective {on the {first} {15th} day of the month} coinciding with or next following the date that the status of the Insured has changed.

If any change in benefits or coverage is requested, the change will become effective {as of the {first} {15th} day of the month} coinciding with or next following the date of the Company's approval. If an Insured is not Actively at Work on the date the requested change in coverage would otherwise begin; then the requested change in coverage will begin on {the {first} {15th} of the month following} the date the Insured is Actively at Work.

BENEFITS

Occupational benefits are only payable if the Accident causing the Injury occurred while the Insured was performing the Usual and Customary Activities of the Insured's occupation as stated on the Insured's application. {The Accident must occur while the Insured is away from the Insured's primary residence and on dispatch with a Contract Carrier.}

{Non-occupational benefits are only payable if the Accident causing the Injury did not occur while the Insured was performing the Usual and Customary Activities of the Insured's occupation as stated on the Insured's application.}

{If the Insured is eligible for more than one Occupational benefit for one Accident, the total amount payable cannot exceed the Combined Single Limit shown in the Schedule of Benefits. Occupational benefits will be paid in the following order according to the date the Company receives notice of claim: {Accident Medical Expense Benefit,} {Temporary Total

Disability,} {Accidental Death and Dismemberment Benefit} {and Permanent Total Disability}. If the Company is unable to determine the order of benefits based upon the above, the Company will determine the order of benefit payment without any prejudice to the Insured or any Beneficiary.}

{Occupational {and Non-occupational} Accidental Death and Dismemberment Benefit. If an Insured suffers an Injury that occurs within 365 days of the date of the Accident resulting in a Loss described in the Table of Losses, the Company will pay the benefit described below:

Table of Losses

<u>Loss of {or Loss of Use of}:</u>	<u>Benefit Payable:</u>
Life.....	Principal Sum
Both Hands.....	Principal Sum
Both Feet	Principal Sum
Sight of Both Eyes	Principal Sum
One Hand and One Foot.....	Principal Sum
One Hand and Sight of One Eye.....	Principal Sum
One Foot and Sight of One Eye	Principal Sum
Speech and Hearing in Both Ears.....	Principal Sum
Quadriplegia	Principal Sum
One Hand	½ Principal Sum
One Foot	½ Principal Sum
Sight of One Eye	½ Principal Sum
Speech	½ Principal Sum
Hearing in Both Ears	½ Principal Sum
Paraplegia	½ Principal Sum
Hemiplegia	½ Principal Sum
Thumb and Index Finger of Same Hand.....	¼ Principal Sum

The Principal Sum is shown in the Schedule of Benefits.

If more than one Loss occurs as the result of one Accident, only one amount, the largest, is payable.

{The Loss of Life benefit shown in the Table of Losses will be paid as a lump sum with monthly installments as shown in the Schedule of Benefits. Payment of the Monthly Installment will end on the earlier of:

1. the date the full Principal Sum has been paid; or
2. the date the Beneficiary dies. }

“Loss” means:

1. for a hand, total, complete and permanent severance of the entire hand at or above the wrist joint;
2. for a foot, total, complete and permanent severance of the entire foot at or above the ankle joint;
3. for sight, total and irrecoverable loss of sight;
4. for speech and/or hearing, total and irrecoverable loss of the entire faculty of hearing and/or speech;
5. for quadriplegia, the total continuous and uninterrupted paralysis without severance of both upper and lower limbs as certified by a Physician to be permanent and irreversible;
6. for paraplegia, the total continuous and uninterrupted paralysis without severance of both lower limbs as certified by a Physician to be permanent and irreversible;
7. for hemiplegia, the total continuous and uninterrupted paralysis without severance of both upper and lower limbs on one side of the body as certified by a Physician to be permanent and irreversible; or
8. for thumb and index finger, total, complete and permanent severance through or above the metacarpophalangeal joints.

{“Loss of Use” means the total, irrecoverable and continuous inability to use for 12 consecutive months, and such Loss of Use is determined to be permanent and irrecoverable at the end of such period.}}

{Occupational {and Non-occupational} Accident Medical Expense Benefit. If the Insured receives treatment for an Injury caused by an Accident, the Company will pay the Reasonable and Customary Charge up to the Accident Medical Expense Maximum Benefit shown in the Schedule of Benefits for services and supplies shown below, subject to the following:

1. The treatment must be Medically Necessary;
2. The Insured must receive treatment within the Commencement Period shown in the Schedule of Benefits;
3. The expense must be incurred during the Benefit Period shown in the Schedule of Benefits;
4. The covered service or supply must be prescribed by a Physician; and
5. The Deductible shown in the Schedule of Benefits must be satisfied.

The following services and supplies are covered under the Policy:

1. use of a professional ambulance service for a trip to or from a Hospital;
2. treatment by a Physician for medical care for treatment of an Injury;
3. initial cast, splint, truss, brace, artificial limb and artificial eye, but not replacement of such items;
4. rental of oxygen equipment, Hospital beds, wheelchairs and other durable equipment not to exceed the purchase price of such equipment;
5. medical charges made by a Hospital for Inpatient services, Outpatient services, and emergency room services. Hospital room and board charges are limited to the average semi-private room rate charged by the Hospital. Intensive Care room and board charges are limited to two times the average semi-private room rate charged by the Hospital;
6. care by a qualified nurse, if under the supervision of a registered graduate nurse, for Home Health Care which follows a seven-day period of Hospital Confinement;
7. medical charges made by an Extended Care Facility for Inpatient services which follows a seven-day period of Hospital Confinement, provided the Confinement in the Extended Care Facility results from the need for further and indefinite medical care and the attending Physician certifies the Confinement;
8. Outpatient manipulation therapy treatment up to the Maximum Benefit shown in the Schedule of Benefits;
9. Outpatient physical therapy treatment up to the Maximum Benefit shown in the Schedule of Benefits;
10. prescription drugs that have been prescribed in writing by a Physician; and
11. care, treatment or replacement of Sound Natural Teeth.

For this benefit, “Deductible” means the total amount of expenses incurred for covered services and supplies that the Insured must pay before benefits begin. The Deductible is shown in the Schedule of Benefits.

Exclusions. In addition to the Exclusions and Limitations listed in the Policy, the Accident Medical Expense Benefit will not be paid for charges, services or supplies for:

1. any service or supply provided outside of the United States;
2. prosthetic or orthopedic appliances, except as required for the replacement of natural parts of the body;
3. dental treatment except for the care, treatment or replacement of Sound Natural Teeth;
4. charges for care or services furnished by any agency or program funded by federal, state or local government. This does not apply to Medicaid or where prohibited by law;
5. cosmetic, plastic or restorative surgery unless Medically Necessary for the treatment of an Injury;
6. eye refractions, eyeglasses or contact lenses, or for the cost of a hearing aid;
7. expenses incurred after the Benefit Period;
8. any service or charge for which the Insured is not legally obligated to pay;
9. sales tax or gross receipts tax, or any charges to complete a claim form;
10. transportation costs, other than for emergency ambulance services;
11. custodial, respite, rest or supportive care which does not assist the Insured to recover from an Injury;
12. personal comfort items such as telephone, television or similar services; and
13. expenses incurred which are in excess of the Reasonable and Customary Charge. }

{Occupational Temporary Total Disability Benefit. If Total Disability due to Injury begins during the Commencement Period before the Insured reaches Age 80, the Company will pay the Occupational Temporary Total Disability Benefit up to the Maximum Weekly Benefit Amount up to the Benefit Period shown in the Schedule of Benefits.

Benefits will begin after satisfaction of the Waiting Period shown in the Schedule of Benefits. Benefits will cease on the earlier of:

1. the date the Insured no longer meets the definition of Total Disability;
2. the date the Benefit Period is reached; or
3. the date the Insured dies.

If the Insured is not working in any occupation while disabled, the amount of benefit payable under the Policy will be { the maximum percentage shown in the Schedule of Benefits of the Insured's Average Weekly Earnings on the date the Insured becomes Totally Disabled due to Injury, not to exceed } the Maximum Benefit shown in the Schedule of Benefits.

If the Insured is working while disabled, the amount of benefit payable under the Policy will be {the maximum percentage shown in the Schedule of Benefits of the Insured's Average Weekly Earnings on the date the Insured becomes Totally Disabled due to Injury, not to exceed} the Maximum Benefit shown in the Schedule of Benefits, less any earnings the Insured receives for that work.

If the Insured recovers after part of a week, the Company will pay for the part of the week at a daily rate equal to one-seventh of the Maximum Weekly Benefit.

A Total Disability commencing after the Insured has received benefits under the Policy for a prior Total Disability will be considered a continuation of the prior Total Disability unless:

1. the periods of Total Disability are separated by at least { 14 – 30 } days for which the Insured is Actively at Work; or
2. the periods of Total Disability are due to a separate Accident. }

{Occupational Permanent Total Disability Benefit. If the Insured is Totally Disabled due to an Injury, the Company will pay the Occupational Permanent Total Disability Benefit shown in the Schedule of Benefits if:

1. the benefits payable for the Occupational Temporary Total Disability Benefit ceased solely because the Occupational Temporary Total Disability Benefit Period shown in the Schedule of Benefits has been reached, but the Insured remains Totally Disabled;
2. the Insured is under Age 70 on the date the Benefit Period for Occupational Temporary Total Disability Benefit shown in the Schedule of Benefits has been reached; and
3. the Insured has been granted a Social Security Disability Award for such Total Disability.

The amount payable under the Occupational Permanent Total Disability Benefit will be reduced by any amounts payable under the Accidental Death and Dismemberment benefit payable for the same Accident.

{The amount payable under the Policy will be paid in a lump sum as shown in the Schedule of Benefits.} {The amount payable under the Policy will be paid in monthly installments as shown in the Schedule of Benefits. The monthly installments will end on the earlier of the following:

1. the date the Maximum Benefit is paid;
2. the date the Insured is no longer Totally Disabled;
3. the date the Insured's Social Security Disability Award ceases; or
4. the date the Insured dies.}}

{Exposure and Disappearance. If due to an Accident, the Insured is unavoidably exposed to the natural elements and the Insured would otherwise be eligible for benefits under the Policy, it is presumed that the Insured suffered an Injury and the Company will pay applicable benefits for the coverages provided in the Policy.

If the Insured is involved in an Accident which results in the forced landing, stranding, sinking or wrecking of a conveyance in which the Insured was an occupant and the Insured's body is not located within one year of the date of the Accident, the Company will presume the Insured has died from the Accident, and the Company will pay the Loss of life benefit under the Accidental Death and Dismemberment benefit.}

EXCLUSIONS AND LIMITATIONS

The Policy does not provide any benefits for an Injury from:

1. Sickness, disease or bacterial infection except which results from an Injury or bacterial infections which results from accidental ingestion of contaminated substances;
2. suicide, attempted suicide, intentionally self-inflicted Injury, while sane or insane (in Colorado or Missouri, while sane);
3. any loss sustained by the Insured, for occupational benefits, that results from Injury sustained while the Insured is being transported to or from the Insured's occupation, unless the Insured is being transported in a vehicle that is regularly used by the Insured in the Insured's occupation;
4. any loss caused by the Insured engaging in any act or occupation which is a violation of the law of the jurisdiction where the loss or cause of loss occurred. A violation of law means a felony violation;
5. any loss caused by the Insured's riding or driving in any kind of organized race;
6. any loss for which benefits are provided under any Workers' Compensation Law, Occupational Disease Law, the 4800 Time Benefit Plan or similar legislation;
7. care that is not Medically Necessary;
8. Nervous or Mental Disorders;
9. {Injury as a result of air travel, except,
 - a. as a fare-paying passenger on a commercial airline on a regularly scheduled route; or
 - b. as a passenger for transportation only and not as a pilot or crew member;}
10. war, declared or undeclared; and
11. any loss caused by an Accident that occurs while an Insured has been determined to be intoxicated:
 - a. by judicial or administrative judgment or order;
 - b. by evidence of an alcohol concentration in the Insured's blood, breath or urine which equals or exceeds the limits set by applicable motor vehicle laws; or
 - c. by other evidence demonstrating the Insured was under the influence of any alcohol, narcotic, barbiturate or hallucinatory drug, unless the same was administered on the advice of a Physician and was taken according to the prescribed dosage;and the use of such substance was a proximate cause of the Injury.

TERMINATION OF INSURANCE

Termination of the Policy. The Company may terminate the Policy on {any premium due date} {the first day of any month} {any date} on or after the first Policy Anniversary Date. Written notice must be provided to the Policyholder at least {60-120} days prior to termination. The Policyholder may terminate the Policy on any date. The Policyholder is responsible for notifying each Insured of the termination of the Policy.

Termination of Insured's Coverage under the Policy. The Insured's insurance will cease on the earliest of the following dates:

1. the date the Policy ends {or the date the Contract Carrier is no longer affiliated with the Policyholder};
2. the end of the last period for which any required premium contribution agreed to in writing has been made, subject to the Grace Period provision;
3. the date the Insured attains Age 80;
4. the date the Insured is no longer eligible for insurance.

Termination of the insurance of any Insured will be without prejudice to any claim originating before the date of termination.

PREMIUMS

The Company provides insurance coverage in return for premium payment. Premiums are payable to the Company. The first premium is due on the Policy Effective Date. Subsequent premiums must be paid to the Company on or before the due date. {The initial premium rates are shown in the Policyholder's application.}

Premium Changes. The Company has the right to change the premium rates on any premium due date on or after the first Policy Anniversary Date. The Company will provide written notice at least {60-120} days before the date of change. The premium rates can also be changed at any time the terms of the Policy are changed.

Grace Period. The Policy has a 31-day grace period for the payment of each premium due after the first premium. Coverage will continue in force during the grace period. Coverage will terminate at the end of the grace period if all premiums due are not paid. The Company will require payment of all premiums for the period this coverage continues in force, including the premiums for the grace period. The grace period will not apply if the Company receives written notice of the Policyholder's or the Insured's intent to terminate coverage.

Unpaid Premium. When a claim is paid during the grace period, any premium due and unpaid for the Insured may be deducted from the claim payment.

Waiver of Premium. After the Insured has been Totally Disabled for the Waiting Period shown in the Schedule of Benefits, premiums will be waived while the Insured remains Totally Disabled, not to exceed the Benefit Period. The Insured is responsible for the payment of all premiums due up to the date the Insured is notified by the Company, in writing, of the date the waiver has gone into effect. The coverage will stay in force, without payment of premium, as long as the Insured is Totally Disabled; however, when the Benefit Period ends, the waiver of premium ends. The Insured's premium payments must resume at the next premium due date to continue coverage under the Policy.

After a period during which the Company has waived premium payments, the Insured has the right to resume premium payments as they become due. The Insured's coverage will be subject to all the provisions and conditions of the Policy.

CLAIM PROVISIONS

Notice of Claim. Written notice of claim must be given to the Company within 30 days after a covered loss occurs, or as soon after that as is reasonably possible. Notice must be given by or on behalf of the claimant to the Company {at 3130 Broadway, Kansas City, Missouri 64111}, or to its authorized administrator or to any of the Company's authorized agents. Notice must include the name of the Insured, the Policy Number and the nature of the loss.

Claim Forms. The Company will furnish claim forms to the Insured within 15 days after notice of claim is received. If the Company does not send the forms within that time, the Insured can send written proof of the occurrence, character and extent of loss for which the claim is made, within the time stated in the Policy for filing proof of loss.

Proof of Loss. Written proof of loss must be furnished to the Company at the Company's home office within 90 days after the date of the loss. Failure to furnish proof within the time required will not invalidate or reduce any claim if it was not reasonably possible to give proof within that time, if the proof is furnished as soon as reasonably possible. In no event, except in the absence of legal capacity, will proof of loss be accepted later than one year from the time proof is required.

Time Payment of Claims. Any benefit payable under the Policy will be paid immediately, but not more than 30 days, upon receipt of due written proof of loss.

Payment of Claims. All benefits will be payable to the Insured, unless assigned. Any benefits payable on or after the Insured's death will be paid to the Beneficiary.

If any benefit is payable to an estate or to a minor or person not otherwise competent to give a valid release, the Company may pay such benefit, up to the amount allowed by the law of the state in which the minor or incompetent resides. Such payment will be made to the legal guardian of the minor or incompetent. Any payment made by the Company in good faith under this provision will fully discharge the Company to the extent of the payment.

Physical Examination and Autopsy. The Company, at the Company's expense, will have the right and opportunity to examine any Insured for whom a claim is pending when and as often as it may reasonably be required during the pendency of a claim. The Company, at the Company's expense, will have the right to make an autopsy in case of death, unless it is prohibited by law.

Legal Actions. No Insured can bring an action at law or in equity to recover on the Policy until more than 60 days after the date written proof of loss has been furnished according to the Policy. No such action may be brought after the expiration of three years (six years in Alabama and South Carolina; five years in Kansas) after the time written proof of loss is required to be furnished. If the time limit of the Policy is less than allowed by the laws of the state where the Insured lives, the limit is extended to meet the minimum time allowed by such law.

GENERAL PROVISIONS

Certificates. A Certificate will be provided to the Insured. The Certificate will describe the coverage provided, to whom benefits are paid and the provisions of the Policy that apply to the Insured. The Certificate is not a part of the Policy. Any conflict between the terms of the Certificate and the Policy will be decided in favor of the Policy. A copy of the Policy may be examined at the office of the Policyholder.

Clerical Error. Clerical errors or delays in keeping records for the Policy will not deny insurance that would otherwise have been granted, nor extend insurance that otherwise would have ceased and call for a fair adjustment of premium and benefits to correct the error.

Conformity to Law. Any provision of the Policy that is in conflict with the laws of the state in which it is issued is amended to conform with the laws of that state.

Entire Contract. The entire contract between the parties includes the Policy, any endorsement and riders, the Policyholder's application (that is attached to the Policy when issued) and the Insured's individual enrollment form, if any. All statements made by the Policyholder or an Insured will, in the absence of fraud, be deemed representations and not warranties, and no such statement will be used in defense of a claim hereunder unless it is contained in a written instrument signed by the Policyholder, the Insured, the Insured's Beneficiary or personal representative, a copy of which has been furnished to the Policyholder, the Insured, the Insured's Beneficiary or personal representative.

Amendments and Changes. No agent is authorized to alter or amend the Policy, or to waive any conditions or restrictions herein, or to extend the time for paying a premium. The Policy and the Certificate may be amended at any time, in writing, by mutual agreement between the Policyholder and the Company without the consent of the Insured, but without prejudice to any loss incurred prior to the effective date of the amendment. No person except an Officer of the Company has authority on behalf of the Company to modify the Policy or to waive or lapse any of the Company's rights or requirements.

Incontestability. After the Policy has been in force for two years, it can only be contested for nonpayment of premiums. No statement made by an Insured can be used in a contest after the Insured's insurance has been in force for two years during the Insured's lifetime. No statement an Insured makes can be used in a contest unless it is in writing and signed by the Insured.

Insurance Data. The Policyholder must give the Company the names of all individuals insured. The names of persons who later become insured and the names of those who cease to be eligible must also be given. The eligibility dates and any other necessary data must be given to the Company so that the premium can be determined.

The Company has the right to audit the Policyholder's books and records as they relate to this insurance. The Company can authorize someone else to perform the audit. Any such inspection may be done at any reasonable time.

Misstatement Of {Sex Or} Age. If relevant facts about the Insured were not accurate:

1. an adjustment of premium will be made; and
2. the true facts will decide what amount of insurance is valid under the Policy.

{Multiple Certificates. The Insured is not eligible for coverage under more than one Certificate providing accident coverage under group policies issued by the Company to the Policyholder. If premium is being paid for more than one Certificate, coverage will be in effect under only one Certificate at any one time and premiums paid for Certificates that are not in effect will be refunded. }

Workers' Compensation. The Policy is not a Workers' Compensation policy. The Policy does not satisfy any requirement for coverage by Workers' Compensation Insurance.

FIDELITY SECURITY LIFE INSURANCE COMPANY
Kansas City, MO

APPLICATION FOR GROUP ACCIDENT INSURANCE

1. Name of Association: _____

2. Address: _____

3. On its effective date, this Policy will cover eligible persons who are in any of the classes described herein. Thereafter, eligible persons added to this Policy will be covered on the date they are in one of the classes.

Coverage for any person ceases on the date the person is no longer an eligible member of any class elected.

The Applicant elects the COVERAGES listed in the Plan Selection to be provided by this Policy for the Class(es) listed in the Plan Selection only. Each Coverage is payable per person per covered accident, subject to the terms, limitations, and restrictions of this Policy:

4. Policy Effective Date: _____

The Applicant hereby understands that coverage will not be effective and no Policy will be issued until this application has been accepted by Fidelity Security Life Insurance Company, or its authorized agent, and the premium has been paid as required by the Company.

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Upon acceptance of this application by the Company, or its authorized representative, the application becomes part of the Policy.

Dated at: _____ this _____ day of _____, 20 _____

Signed for the Applicant: _____

Title (must be an officer): _____

Licensed Resident Agent: _____

FOR COMPANY USE ONLY

Date: _____ Accepted by: _____

Policyholder: _____ Policy Number _____
Name

ENROLLMENT FORM – INDEPENDENT OWNER/OPERATOR PROGRAM

Owner/Operator's Name: _____ Date of Birth _____

Address: _____

Phone #: _____ Fax #: _____ Social Security #: _____

Type of Truck/Trailer used: _____ Radius of Operations: _____ miles
 Cargo Description (include explanation & description of any hazardous materials): _____

List the Contract Carriers with whom the Owner/Operator has a formal lease agreement and attach copies of all lease agreements
(lease agreements only required if billing owner/operator directly; otherwise Contract Carrier will provide):

Contract Carrier	Address	Phone #

Beneficiary Designation: _____ Relationship to Owner/Operator: _____

Requested Effective Date: _____ Desired Monthly Billing Date (check one): 1st 15th

Benefits requested : Occupational Coverage } Non-Occupational Coverage }
 Plan _____ }

Billing should be sent to: Owner/Operator
 Contract Carrier: _____

		COST OF INSURANCE		ASSOCIATION/ADMINISTRATION FEE		TOTAL MONTHLY COST
		\$	+	\$	=	\$

*Monthly Administration Fee not applicable if billing Contract Carrier.

Make check payable to: Fidelity Security Life Insurance Company

Agent Name: _____

Phone #: _____ Fax #: _____ Agent #: _____

This form does not bind any agent or insurance company to coverage. This is a Policy request form and will not effect any insurance until approved by the Company or its representatives. The information above is true and acceptable to the best of my knowledge.

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

 Owner/Operator's Signature

 Date

SERFF Tracking Number: *FDLT-126195050* *State:* *Arkansas*
Filing Company: *Fidelity Security Life Insurance Company* *State Tracking Number:* *42688*
Company Tracking Number: *M-3036*
TOI: *H02G Group Health - Accident Only* *Sub-TOI:* *H02G.000 Health - Accident Only*
Product Name: *Group Accident Insurance*
Project Name/Number: *Group Accident Insurance/M-3036*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: FDLT-126195050 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42688
Company Tracking Number: M-3036
TOI: H02G Group Health - Accident Only Sub-TOI: H02G.000 Health - Accident Only
Product Name: Group Accident Insurance
Project Name/Number: Group Accident Insurance/M-3036

Supporting Document Schedules

Satisfied -Name: Flesch Certification **Review Status:** Approved-Closed 06/25/2009
Comments:
Attachment:
M-3036 Readability Certification.pdf

Satisfied -Name: Application **Review Status:** Approved-Closed 06/25/2009
Comments:
We have submitted applications A-01101 and A-01102 under the Form Schedule Tab.

Satisfied -Name: Articles of Incorporation and By-laws **Review Status:** Approved-Closed 06/25/2009
Comments:
See Attached.
Attachment:
National Associated Buying Services Association.pdf

Satisfied -Name: Life Information WEB Content Overview **Review Status:** Approved-Closed 06/25/2009
Comments:
See Attached.
Attachment:
Life Information web content overview _2_.pdf

Satisfied -Name: NABS Lifestyle Description **Review Status:** Approved-Closed 06/25/2009
Comments:
See Attached.
Attachment:
NABS LIFESTYLE DESCRIPTION WITH ACCESS revised.pdf

SERFF Tracking Number: FDLT-126195050 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42688
Company Tracking Number: M-3036
TOI: H02G Group Health - Accident Only Sub-TOI: H02G.000 Health - Accident Only
Product Name: Group Accident Insurance
Project Name/Number: Group Accident Insurance/M-3036

Satisfied -Name: Wellness Resources for NABS **Review Status:** Approved-Closed 06/25/2009
Members

Comments:
See Attached.

Attachment:
Wellness_Resources for NABS members.pdf

FIDELITY SECURITY LIFE INSURANCE COMPANY
Kansas City, Missouri

I, AN OFFICER OF Fidelity Security Life, certify that the Flesch reading ease score for policy form(s) _____* meets the minimum requirements of the NAIC Policy Language Model Simplification Act.

In accordance with the NAIC Model Act, certain language has been excepted. Such language includes the following: (a) name and address of Fidelity Security Life Insurance Company; name, number and title of the policy; index page; captions and subcaptions; specifications pages, schedules and tables; (b) all words defined in the policy; and (c) medical terminology, if applicable.

* M-3036
C-3036
A-01101
A-01102

Combined = 50



Martha E. Madden
Vice President and General Counsel

March 19, 2009
Date

NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION

GENERAL INFORMATION

Name: National Associated Buying Services Association

Address: 6509 Windcrest Drive, Suite 200
Plano, Texas 75024

Contact: Phil Rearick
Beth Banks; bbanks@specialinc.com for admin.

E-mail Address: phil@specialinc.com

Telephone: 214-291-1208

Facsimile: 972-960-0377

Cell: 214-335-2389

Date of Incorporation: January 26, 1989

Charter Number: 0110328601

Federal Tax EIN: 75-2321721

Texas Comptroller No.: 30113276551

Duration: Perpetual

Bylaws: Amended February 20, 2007

Domiciliary State: Texas

Registered Agent/Office: Corporate Creations Network, Inc.
4265 San Felipe, #1100
Houston, Texas 77027

State Admissions: None

Purpose: The purposes for which the corporation is organized are:
(a) to exercise all rights and powers conferred on non-profit corporations under the laws of the State of Texas, or which may hereafter be conferred; (b) to educate members about consumer rights and to create consumer awareness of nationwide pricing differences between goods and services; (c) to make available to members various discounted goods and services as they are offered to the association; (d) to

educate members about sound business practices and opportunities and to promote free enterprise; and (e) to educate members in matters of personal financial planning and to maximize quality of life economically and through health awareness programs.

Members: Yes

Annual Meeting of Members: 9:00 a.m. on the third (3rd) Friday of each January.

Annual Meeting of Board: 10:00 a.m. on the third (3rd) Friday of each January.

Place of Meetings: 6509 Windcrest Drive, Suite 200
Plano, Texas 75024
(or as determined by the Board of Directors)

Financial Institution: Legacy Bank

Membership Benefits: Lifestyle Benefits
Limited Supplemental Insured Benefits

Accountant: Contact Phil Rearick

Counsel: Wayne De Lawler, Jr.
300 N. Coit Road, Suite 350
Richardson, Texas 75080
972-664-9170
214-213-2701 (cell)
972-664-9165 (fax)

BOARD OF DIRECTORS:

J. Ross Hopkin

233 W. Main Street
Lewisville, Texas 75057
469-635-6000
469-635-6001 (fax)
972-670-9566 (cell)
ross@thebrokerageinc.com

Philip A. Rearick

6509 Windcrest Drive, Suite 200
Plano, Texas 75024
214-291-1208
972-960-0377 (fax)
214-335-2389 (cell)
phil@specialinc.com

Wayne De Lawler, Jr.

5924 Fallsview Lane
Dallas, Texas 75252
972-664-9170
972-664-9165 (fax)
214-213-2701 (cell)

delawler@sbcglobal.net

OFFICERS

President:
Vice-President
Secretary and General Counsel:
Treasurer:

J. Ross Hopkin
Philip A. Rearick
Wayne De Lawler, Jr.
Philip A. Rearick

NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION STATE CHART

STATE	COA FILING DATE	COA APPROVAL DATE	COMMENTS
AL	1/31/2008	2/5/2008	
AK			
AR			
AZ			
CA	1/31/2008	2/7/2008	
CO			
CT			
DE			
DC			
FL	1/31/2008	2/1/2008	
GA	1/31/2008	2/4/2008	
HI			
IA			
ID			
IL			
IN			
KS	1/31/2008	2/1/2008	

NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION STATE CHART

STATE	COA FILING DATE	COA APPROVAL DATE	COMMENTS
KY			
LA			
ME			
MD			
MA			
MI			
MN			
MO	2/5/2008	2/7/2008	
MS			
MT			
NC	2/5/2008	2/12/2008	
ND			
NE			
NH			
NJ			
NM			
NV			

NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION STATE CHART

STATE	COA FILING DATE	COA APPROVAL DATE	COMMENTS
NY			
OH			
OK			
OR			
PA	1/31/2008	2/1/2008	
RI			
SC	2/5/2008	2/7/2008	
SD			
TN	1/31/2008	2/1/2008	
TX		1/26/1989	
UT			
VA			
VT			
WA			
WI			
WV			
WY			



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION (file number 110328601), a Domestic Nonprofit Corporation, was filed in this office on January 26, 1989.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 30, 2008.



A handwritten signature in black ink that reads "Phil Wilson".

Phil Wilson
Secretary of State

**AMENDED BYLAWS
OF
NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION**

**ARTICLE 1.
PURPOSES AND POWERS**

1.01 Purposes. The corporation is organized for any lawful purpose or purposes as set forth in its Articles of Incorporation or any amendments thereto.

1.02 Mission. The mission of the corporation, in keeping with its general purposes, is: (a) the fostering and promoting of education and research concerning the advantages and availability of suitable discounted medical, medically related, non-medical and other benefit and service programs in respect of its members; (b) the collection and dissemination of statistics and other relevant and reliable information, facts and data concerning the benefits, medical issues and other related matters; (c) the location and determination of suitable and appropriate benefits, medical and other related products and services needed and desired by members at efficient and reasonable costs; (d) the providing of emails, internet websites, media, newsletters, conferences, meetings, seminars, forums and other means of effective communication to members and others concerning the purposes of the corporation; and (e) enhancing consumer awareness by providing information related to health, wellness, the environment and other human issues which make a difference in our world.

1.03 Powers. The corporation shall possess all powers which a corporation may have that is organized under the Texas Business Organizations Code, as the same may from time to time be amended.

1.04 Bylaws. These bylaws shall govern and control the internal corporate affairs of the corporation and guide the officers, directors and members of the corporation in their efforts to promote the business and objectives of the corporation.

**ARTICLE 2.
PRINCIPAL OFFICE; REGISTERED OFFICE AND AGENT**

2.01 Principal Office. The principal office in the State of Texas shall be at such place as the board of directors may from time to time designate by duly adopted resolution. The corporation may also have an office or offices at such other place or places within or without the State of Texas as the board of directors may from time to time designate or the business of the corporation requires.

2.02 Registered Office. The corporation shall have and continuously maintain in Texas a registered office which may be, but need not be, the same as its principal office. The address of the registered office will be identical with the office of the registered agent of the corporation. Such office will be continuously maintained within Texas for the duration of the corporation. The board of directors may from time to time change the address of its registered office by duly adopted resolution and submission of the appropriate forms to the Office of the Secretary of State.

2.03 Registered Agent. The corporation shall have and continuously maintain in Texas a registered agent, which agent may be an individual resident in Texas whose business office is identical with such registered office, or a domestic corporation, whether for profit or not for profit, or a foreign corporation for profit or not for profit, authorized to transact business or to conduct its affairs in Texas

which has a business office identical with such registered office.

2.04 Change of Registered Office or Agent. The corporation may change its registered office or change its registered agent, or both, upon filing in the office of the Secretary of State a statement setting forth such change. The change shall be authorized by the board of directors or by an officer so authorized by the board of directors. The registered agent shall be agent of the corporation upon whom any process, notice or demand required or permitted by law to be served on the corporation may be served.

2.05 Resignation of Registered Agent. Any registered agent may resign; however, the corporation will not recognize the resignation of any registered agent appointed by it, or the discontinuance of any registered office, unless it receives a copy of such agent's resignation, or discontinuance of the registered office, as sent to the Office of the Secretary of State, such copy to be delivered or sent to the corporation registered or certified mail, addressed to the Principal Office of the corporation and directed to the attention of the secretary of the corporation. A copy of such notice shall be delivered or mailed no later than the date of filing of the statement with the Office of the Secretary of State; and such statement of resignation, or discontinuance of the registered office, shall be effective on the earlier of the filing by the corporation of an amendment to its annual registration statement designating a new registered agent, or registered office if discontinued, or the thirty-first (31st) day after the date on which the statement is filed.

ARTICLE 3. MEMBERS

3.01 Qualification. The Association shall have one or more classes of members. Membership in the corporation shall be open to any individual consumer who is a citizen or resident alien of the United States (U.S.), is at least 18 years old with a valid U.S. taxpayer identification number and subscribes to the purposes of the corporation. Members shall have a shared or common interest of having a need for the education, benefits and/or services offered through the Association and shall adhere to the principles and objectives of the Association. The spouse and/or dependents of an active member may also be eligible for optional family membership benefits through the active member. The definition of "dependents" shall be set forth in the terms and conditions of the membership application or as determined by applicable state law. An entity may be a sponsoring member only.

3.02 Application and Admission. Application for membership shall be made in writing, by electronic message confirmation or by telephonic recording and shall contain such information as the corporation may require. Each application shall be accompanied by an application or enrollment fee and monthly dues in an amount determined by the board of directors. A refund policy shall also be determined by the board of directors in accordance with these bylaws and any applicable law.

3.03 Classes of Members. The designation of such class or classes of members shall be determined by the board of directors and shall include (a) Individual Members and/or (b) Self-Employed Independent Contractor Members. To identify a specific group or for administrative purposes only, the board of directors may create Sponsoring or Limited Memberships which may include (a) Institutional or Corporate Members (business firm, partnership, corporation or other entity), (b) Franchisee Members (a business or group of businesses authorized to distribute a franchisor's services, goods and brand pursuant to a contractual franchise agreement), (c) Trade Group/Association Members (bona fide trade, industry or professional groups or associations or chambers of commerce, or (d) Affiliated Association Members or (e) Affinity Marketing Group Members.

Various classes of memberships may provide unique additional products and services to meet the needs of such groups. Divisions within each class or classes of members and benefit package levels for each member may also be determined by the board of directors. The qualifications, rights and benefit package levels of each class of members or division of members may be changed at any time by the board of directors.

3.04 Active Member. Any member who is not in default in the payment of dues for a period of one (1) month or more from the beginning of the period for which such dues become payable shall be an active member and shall be entitled to all of the rights, privileges and benefits provided to such members as so determined by the board of directors.

3.05 Certificates or Cards Evidencing Membership. The board of directors by duly adopted resolution may, but is not required, to provide for the issuance of certificates or cards evidencing membership in the corporation. Such certificates or cards may be signed by the president, vice-president or executive director and by the secretary or an assistant secretary. The name and address of each member and the date of issuance of the certificate or card shall be entered in the records of the corporation. If any certificate or card shall become lost, mutilated or destroyed, a new certificate or card may be issued upon such terms, provisions and conditions as the board of directors may determine.

3.06 Voting Rights. Each member of each class shall have voting rights and shall be entitled to one vote unless limited by the board of directors in accordance with the provisions of these bylaws. Sponsoring or Limited Members shall not have voting rights.

3.07 Termination of Membership. Membership in the corporation terminates upon the death of a member. A member shall also be automatically ineligible for membership and loses all privileges, rights and benefits of the corporation when the member of any class shall be in default in the payment of dues for a period of one month from the beginning of the period from which such dues became payable, unless the board of directors, in its discretion, extends the time for payment of dues. Termination for the failure to pay dues shall be effective retroactively to the date such dues were payable and no further notice of such termination shall be required, although it may be given. Furthermore, the board of directors may expel or suspend a member pursuant to a procedure, duly adopted by the board of directors, that is fair and reasonable and carried out in good faith. The expulsion or suspension of a member, or termination of a membership, does not relieve the member from obligations the member may have to the corporation for dues, fees or charges for goods or services.

3.08 Resignation. Any member personally or through his duly authorized attorney-in-fact may resign by filing a written resignation with the secretary of the corporation but such resignation shall not entitle such member to any refund of dues and the member shall immediately lose all privileges and rights of the corporation.

3.09 Reinstatement. Upon written request signed by a former member and filed with the corporation, the board of directors may reinstate such former member to membership in the corporation upon such terms as the board of directors may deem appropriate.

3.10 Transfer of Membership. Membership in the corporation is not transferable or assignable.

3.11 Dues. The board of directors shall from time to time determine the enrollment or application fee, if any, and the amount of dues payable to the corporation by its members, classes of members or divisions of members. The board of directors may waive any enrollment fees or dues for members, particularly for those who are part of a group where a sponsor of the group pays a stated fee on behalf of all group members.

3.12 Payment of Dues. Dues shall be payable monthly or annually, in advance, or in such other manner as the board of directors may so determine. The Association reserves the right to change the membership dues or fees after 30 days notice in writing or by email to the Member. A person may only enroll in one membership in the Association.

3.13 Liability of Members. The members shall not have ownership rights in the corporation and shall not be personally liable for the debts, liabilities or obligations of the corporation.

ARTICLE 4. MEETINGS OF MEMBERS

4.01 Place of Meetings. Meetings of members shall be held at the time and place, within or outside of the State of Texas, stated in the notice of the meeting or in a waiver of notice.

4.02 Annual Meeting. An annual meeting of the members shall be held each year on a day and hour to be selected by the Board of Directors for the purpose of electing Directors and for the transaction of such other business as may come before the meeting. If the board of directors fails to call the annual meeting at the designated time, a member of the corporation may demand that the meeting be held within a reasonable time. The demand must be made in writing and sent to an officer of the corporation by registered mail. If the annual meeting is not called before the 61st day after the date of demand, a member may compel the holding of such annual meeting by legal action directed against the board of directors, and each of the extraordinary writs of common law and of courts of equity are available to the member to compel the holding of the meeting. Failure to hold an annual meeting at the designated time does not result in the winding up and termination of the corporation.

4.03 Special Meetings. Special meetings of the members of the corporation may be called by the president, the secretary, the board of directors or by members having not less than one-tenth (1/10) of the votes entitled to be cast at such meeting. Business transacted at a special meeting shall be confined to the purposes stated in the notice of the meeting.

4.04 Notice of Meetings. Notice of an annual meeting is not required. The corporation may, however, provide written notice of the place, date, and time of a meeting of members of the corporation and, if the meeting is a special meeting, the purpose or purposes for which the meeting is called. The notice shall be delivered to each member entitled to vote at the meeting not later than the 10th day and not earlier than the 60th day before the date of the meeting. Notice may be delivered personally, by mail, or by facsimile or electronic message. "Mailed" is considered to be delivered on the date notice is deposited in the United States mail with postage paid in an envelope addressed to the person at the person's address as it appears on the membership records. "Transmitted by facsimile or electronic message" is considered to be delivered when the facsimile or electronic message is successfully transmitted. If there are more than 1,000 members at the time a meeting is scheduled or called, notice may be given by publication in any newspaper of general circulation in the community in which the principal office of the corporation is located.

4.05 Quorum. The members of the corporation holding one tenth (1/10) of the votes entitled to be cast, in person or by proxy, constitute a quorum. The vote of the majority of the votes entitled to be cast by the members present, or represented by proxy, at a meeting at which a quorum is present, shall be the act of the members, unless the vote of a greater number is required by law, the articles or the bylaws. If, however, such quorum shall not be present or represented at any meeting of the members, the members entitled to vote thereat, present in person, shall have the power to adjourn the meeting from time to time, without notice other than announcement at the meeting, until a quorum shall be present. At such adjourned meeting at which a quorum shall be present or represented, any business may be transacted which might have been transacted at the original meeting. The members present at a duly constituted meeting may continue to transact business until adjournment, despite the withdrawal of enough members to leave less than a quorum.

4.06 Voting Of Members. Each member, regardless of class, shall be entitled to one vote on each matter submitted to a vote at a meeting of members, except to the extent that the voting rights of members of any class or classes are limited, enlarged or denied by the articles or the bylaws.

4.07 Proxies by Members. A member may vote in person or by proxy executed in writing by the member or the member's attorney-in-fact. A member can revoke his proxy in writing at anytime by sending notice of such revocation to the corporation. Any person who becomes a member shall execute an appropriate written proxy if such person desires to have any director or officer of the corporation receive notice of and vote and act on said member's behalf in regard to any such meetings of the members. A proxy is not effective for voting purposes unless the original of the proxy is filed with the secretary of the corporation at least ten (10) days before the meeting at which it is to be used.

4.08 Meetings by Communications Equipment. Members may participate in and hold a meeting by means of telephone conference or similar communications equipment in which all persons participating in the meeting can hear each other. Participation in such a meeting shall constitute presence in person at the meeting, except where a person participates in the meeting for the express purpose of objecting to the transaction of any business on the ground that the meeting is not lawfully called or convened.

4.09 Action by Unanimous Written Consent. Any action required to be or which may be taken at a meeting of the members of the corporation may be taken without a meeting if a consent in writing, setting forth the action so taken, shall be signed by all the members entitled to vote with respect to the subject matter thereof, and then delivered to the Secretary of the corporation for inclusion in the corporate record book. Such consent shall have the same force and effect as a unanimous vote of members at a meeting, and may be stated as such in any documents filed with the Secretary of State.

ARTICLE 5. DIRECTORS

5.01 Management by Board of Directors. The business and affairs of the corporation shall be managed by the Board of Directors who may exercise all such powers of the corporation and do all such lawful acts as are not directed or required to be exercised by the members.

5.02 Number, Term; Election. The Board of Directors may not have fewer than three (3) or more than nine (9) directors, and shall consist of the number set by majority vote of the Board of Directors, which may be changed from time to time by resolution of the board of directors. Each director shall hold office for a term of twelve (12) months and shall be eligible for re-election. Directors shall be

elected by plurality vote. Each director elected shall hold office for the term for which elected until his or her successor shall be elected and shall qualify, or until his or her earlier death, resignation or removal.

5.03 Qualifications of Directors. The qualification for becoming and remaining a Director of the corporation are as follows:

- (a) directors must be residents of any state in the United States or the District of Columbia;
- (b) directors must be members of the corporation;
- (c) proposed directors must be nominated by existing directors; and
- (d) directors must attend at least seventy-five (75%) percent of the annual and special meetings of the board of directors.

5.04 Change in Number. The number of directors may be increased or decreased from time to time by vote of a majority of the Board of Directors, but no decrease shall have the effect of shortening the term of any incumbent Director. Any directorship required to be filled by reason of an increase in the number of Directors shall be filled by election at an annual meeting or at a special meeting of members called for that purpose.

5.05 Removal; Resignation. Any director may be removed either for or without cause at any special or annual meeting of members, by the affirmative vote of a majority in number of members present, in person or by proxy, at such meeting and entitled to vote for the election of such director if notice of intention to act upon such matter shall have been given in the notice calling such meeting. Any director may resign by giving written notice to the president or secretary. The resignation shall take effect at the time specified in the notice, or immediately if no time is specified. The acceptance of such resignation shall not be necessary to make it effective.

5.06 Vacancies. Any vacancies occurring in the Board of Directors for any reason may be filled by the affirmative vote of a majority of the remaining directors then in office though less than a quorum. Any director elected to fill a vacancy shall be elected for the unexpired term of his predecessor in office. If there are no directors in office, then an election of directors may be held in the manner provided by law.

5.07. First Meetings. The first meeting of a newly elected Board shall be held without further notice immediately following the annual meeting of members, and at the same place, unless the time or place is changed by unanimous consent of the Directors then elected and serving.

5.08 Regular Meetings. Regular meetings of the Board of Directors may be held without notice at such time and place as shall from time to time be determined by the Board.

5.09 Special Meetings. Special meetings of the Board of Directors may be called by the President on three days' notice to each Director. Special meetings shall be called by the President or Secretary in like manner and on like notice on the written request of two directors. The purpose of any special meeting of the board of directors shall be specified in the notice of such meeting.

5.10 Quorum; Majority Vote. At meetings of the board of directors a majority of the number of directors shall constitute a quorum for the transaction of business; provided, however, that a quorum shall not consist of less than fifty-one percent (51%) of the entire board of directors. The act of a majority of the directors present at a meeting at which a quorum is present will be the act of the board of directors unless a greater number is required by law, the articles or the bylaws. If a quorum is not present at a meeting of the board of directors, the directors present may adjourn the meeting from time to time, without notice other than announcement at the meeting, until a quorum is present. The board of directors shall keep minutes of its proceedings which shall be placed in the minute book of the corporation.

5.11 Action by Unanimous Written Consent. Any action required to be or which may be taken at a meeting of the board of directors or any other committee of the board of directors of the corporation may be taken without a meeting if a consent in writing, setting forth the action so taken, shall be signed by all the directors, or any other committee of the board of directors as the case may be, and then delivered to the Secretary of the corporation for inclusion in the corporate record book. Such consent shall have the same force and effect as a unanimous vote of members at a meeting, and may be stated as such in any documents filed with the Secretary of State.

5.12 Participation in Meetings by Use of Communications Equipment. Any Director may participate in and hold a meeting of the directors by means of a conference telephone, or similar communications equipment by means of which all persons participating in the meeting can hear each other. Participation in such a meeting shall constitute presence in person at the meeting, except where a person participates in the meeting for the express purpose of objecting to the transaction of any business on the ground that the meeting is not lawfully called or convened.

5.13 Compensation. By resolution of the board of directors, the directors may be paid their reasonable expenses (i.e. travel, meals, lodging and entertainment), if any, and may be paid a fixed sum for attendance at each meeting of the board of directors, or receive a stated fee as director. No such payment shall preclude any director from serving the corporation in any other capacity and receiving compensation therefore. Members of the executive committee or of special or standing committees may, by resolution of the board of directors, be allowed like compensation for attending committee meetings.

5.14 Minutes. The board of directors shall keep regular minutes of its proceedings. The minutes shall be placed in the Corporate Record Book of the corporation.

5.15 Conflicts of Interest. Any contract or other transaction between the Corporation and one or more of its directors, or between the Corporation and any firm in which one or more of its Directors are members or employees, or in which they are interested, or between the Corporation and any corporation or association of which one or more of its Directors are shareholders, members, directors, officers or employees, or in which they are interested, shall be valid for all purposes, notwithstanding the presence of such Director or Director at the meeting of the Board of Directors of the Corporation which acts upon or in reference to such contract or transaction, and notwithstanding his or their participation in such action, if the fact of such interest shall be disclosed or known to the Board of Directors, and the Board of Directors shall, nevertheless, authorize, approve and/or ratify such contract or transaction by a vote of the majority of the Directors present, such interested Director or Directors to be counted in determining whether a quorum is present, but not to be counted in calculating a majority of such quorum necessary to carry such a vote.

ARTICLE 6. OFFICERS

6.01 Officers. The officers of the corporation shall be a president and a secretary and may include an executive vice-president as well as one or more vice-presidents (the number to be determined by the board of directors), a treasurer, or combination thereof, and such other officers, including an executive director, as may be elected in accordance with the provisions of this article. The board of directors may elect or appoint such other officers, including one or more assistant secretaries and one or more assistant treasurers, as it shall deem desirable, such officers to have the authority and perform such duties in the management of the corporation as prescribed from time to time by the board of directors or as may be provided in these bylaws. Any two or more offices may be held by the same person, except for the offices of president and secretary.

6.02 Officers to be Active Members. Any person serving as an officer of the corporation must be a member of the corporation.

6.03 Election and Term of Office. The officers of the corporation shall be elected by the board of directors at the annual meeting of the board of directors for a term of twelve (12) months. If the election of officers shall not be held at such meeting, such election shall be held as soon thereafter as convenient. Each officer shall hold office until his or her successor shall have been duly elected and shall have qualified.

6.04 Vacancies. A vacancy in any office because of death, resignation, removal, disqualification or otherwise, may be filled by the board of directors at any meeting for the unexpired portion of the term. New offices may also be created and filled by the board of directors at any such meeting. An assistant or assistants to the elected officers may be made available as necessary upon authorization by the board of directors.

6.05 President. The president will be the chief executive officer of the corporation and shall, subject to the control of the board of directors, supervise and control the business affairs of the corporation. The president will perform all duties incident to such office and such other duties as may be provided in these bylaws or as may be prescribed from time to time by the board of directors. The board of directors shall delegate to the president the necessary authority and responsibility for the administration of the affairs of the corporation subject only to such bylaws as may be adopted and such orders as may be issued by the board of directors relating to the operation of the corporation and long range planning. The president shall be an ex-officio member of each directorial committee of the board of directors without a vote except the executive committee on which he shall serve with a vote, or, except as otherwise provided for in these bylaws or through a resolution of the board of directors. The president shall present a report at each annual meeting of the board of directors covering the operations of the corporation during the preceding fiscal year.

6.06 Executive Vice-President. In the absence of the president, or in the event of his inability or refusal to act, the executive vice president, if one has been appointed, shall perform the duties of the president, and when so acting, shall have all the powers of and be subject to all the restrictions upon the president. The executive vice president shall be the chief administrative and operating officer. He shall serve as secretary to the board of directors and cause to be prepared notices and minutes of meetings of the board. The executive vice president shall be a member of the board of directors and all committees. With the assistance of committee chairmen, he shall be responsible for the administration of all activities in accordance with the policies and regulations of the board of directors. The executive vice

president shall be responsible for hiring, discharging, directing and supervising all employees.

6.07 Vice-President. In the absence of the president and executive vice president or in the event of their inability or refusal to act, the vice presidents, if any, in the order of their seniority, unless otherwise determined by the board of directors, shall, perform the duties of the president, and when so acting, shall have all the power of and be subject to all the restrictions upon the president. A vice president shall perform such other duties as from time to time may be assigned to him by the president or by the board of directors.

6.08 Treasurer. The treasurer or assistant treasurer shall have charge and custody of and be responsible for all funds and securities of the corporation, receive and give receipts for monies received by the corporation from any source whatsoever, and deposit all such monies in the name of the corporation in such banks, trust companies or other depositories as shall be selected by the board of directors. The treasurer or assistant treasurer shall prepare and present quarterly a detailed financial statement of the financial affairs of the corporation. All of the duties, responsibilities and obligations of the treasurer or assistant treasurer may be assigned to a qualified third person or entity by written agreement; however, under such circumstances, the treasurer or assistant treasurer shall retain ultimate responsibility for such functions.

6.09 Secretary. The secretary or assistant secretary of the corporation shall keep the minutes of the meetings of the members, the board of directors and any committees in one or more books provided for that purpose, oversee that all notices are duly given in accordance with the provisions of these by-laws or as required by law, be custodian of the corporate records of the corporation, oversee that the seal of the corporation, if required, is affixed to all documents of the corporation, keep a register of the mailing address of each member which shall be furnished to the secretary or assistant secretary by such member, and in general, perform all duties incident to the office of secretary and such other duties as from time to time may be assigned to the secretary or assistant secretary by the president or by the board of directors.

6.10 Executive Director. An executive director of the corporation may be appointed at such time as the board of directors so designates. The executive director of the corporation may be the chief administrative and operating officer of the corporation and shall be selected by and report to the board of directors, which shall determine the term of his appointment as well as his duties and functions. The executive director of the corporation shall carry out the purposes of the corporation within the framework of the Articles of Incorporation, these by-laws, corporate policies and procedures, and the general and specific assignments given to him by the board of directors. The functions of the executive director shall include, but not be limited to, the following:

- a. selection, employment, and supervision of any employees of the corporation as authorized by the president and the board of directors. All staff employed by the corporation must meet required personnel standards as set forth in the personnel policies of the corporation;
- b. coordination and implementation of planning activities according to an approved work program;
- c. attendance at all meetings of the board of directors and the Executive Committee, except as otherwise determined by the President;
- d. representing the board of directors in dealing with the public and with all

governmental agencies, if required; and

e. such other duties and responsibilities as may from time to time be delegated to him by the president or the board of directors.

6.11 Removal of Officers. Any officer elected or appointed to office may be removed by those persons authorized under these bylaws to elect or appoint such officers whenever in their judgment the best interests of this corporation would be served. Such removal will be without prejudice to the contractual rights, if any, of the officer so removed. Any election or appointment of an officer shall not of itself create contract rights.

6.12 Resignation of Officer. Any officer may resign by giving written notice to the president or the board of directors. The resignation shall take effect at the time specified therein. The acceptance of such resignation shall not be necessary to make it effective.

6.13 Compensation. The compensation of officers of the corporation, if any, shall be determined from time to time by the board of directors.

ARTICLE 7. COMMITTEES

7.01 Establishment of Committees. The board of directors, by resolution duly adopted by a majority of the directors in office, may designate one or more committees, each of which shall consist of two (2) or more directors, which committees, to the extent provided in said resolution, shall have and exercise the authority of the board of directors in the management of the corporation. The designation of such committees and the delegation of authority thereto shall not operate to relieve the board of directors, or any individual director, of any responsibility imposed on it or him by law.

7.02 Executive Committee. The board of directors may designate and appoint an executive committee which shall consist of no less than three (3) members of the board of directors and who each shall serve in such capacity for one (1) year, unless the board shall determine otherwise. The executive committee shall have the authority, those, duties, and exercise those powers as such are determined from time to time by the board by resolution duly adopted and not inconsistent with these bylaws. The executive committee shall have the authority of the board between its meetings, except for that business of the corporation as can only be addressed by a majority of the board of directors at a meeting of said board. A majority of all the members of the executive committee may determine its action and fix the time and place of its meetings, unless the board shall otherwise provide. The board shall have the power at any time to change the number, powers, and members of the executive committee, to fill vacancies, and to discharge any such member of the executive committee.

7.03 Benefits Review Committee. The board of directors, by resolution duly adopted by a majority of the directors in office, may also designate a benefits review committee consisting of the president of the corporation and at least two (2) other persons who are selected by the board of directors. The benefits review committee shall have the responsibility for locating and reviewing potential benefit programs for the different classes of members of the corporation, and recommending such programs to the board of directors for its review, approval and adoption, if it believes it to be in the best interests of the members of the corporation to do so. A majority of all the members of the benefits review committee may determine its action and fix the time and place of its meetings, unless the board of directors shall

otherwise provide. The board of directors shall have the power at any time to change the number, powers, and members of the benefits review committee, to fill vacancies, and to discharge any such member of the benefits review committee.

7.04 Other Committees. Other committees not having and exercising the authority of the board of directors in the management of the corporation may be designated and appointed by a resolution duly adopted by the board of directors or by the president if authorized by a resolution duly adopted by the board of directors. Except as otherwise provided in such resolution, members of each such committee shall be members of the corporation, and the president of the corporation shall appoint the members thereof. Any member may be removed by the person or persons authorized to appoint such member whenever in his or their judgment the best interests of the corporation will be served by such removal. At least one member of each committee shall be a director of the corporation. A majority of all members of such a committee may determine its action and fix the time and place of its meetings, unless the board of directors shall otherwise provide. The board of directors shall have the power at any time to change the number, powers and members of such a committee, to fill vacancies and to discharge any member of such a committee.

7.05 Term of Office. Each member of a committee shall continue as such until the next annual meeting of the board of directors, unless the committee shall be sooner terminated, or unless such member is removed from such committee or resigns. A member of any committee shall be eligible for re-appointment.

7.06 Chairman. One member of each committee shall be designated the chairman of such committee by the board of directors unless otherwise set forth in these bylaws.

7.07 Vacancies. Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided in the case of original appointments.

7.08 Quorum. Unless provided in the resolution duly adopted by the board of directors designating a committee, a majority of the entire committee shall constitute a quorum and the act of a majority of the members present at a meeting at which a quorum is present shall be the act of the committee.

ARTICLE 8. CONTRACTS, CHECKS, DEPOSITS AND FUNDS

8.01 Contracts. The board of directors may authorize the officers or agents of the corporation to enter into contracts or to execute and deliver documents in the name of and on behalf of the corporation. Such authority shall be confined to specific instances. Such contracts may be for any purpose deemed by the board of directors to be appropriate, including the contracting with a third party for any or all management, operational, administrative, marketing, providing of member benefits and other services and functions necessary for the corporation to achieve its purpose.

8.02 Checks, Drafts and Other Orders for Payment. All checks, drafts, or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the corporation shall be signed by such officer or officers, agent or agents, of the corporation, and in such manner as shall from time to time be determined by duly adopted resolution of the board of directors. However, such responsibility may be assigned to a qualified third person or entity by written agreement.

8.03 Deposits. All funds of the corporation shall be deposited from time to time to the credit of the corporation in such banks, trust companies, or other depositories as the board of directors may select.

8.04 Gifts. The board of directors may accept on behalf of the corporation any contributions, gifts, bequests, or devise for the general purpose or for any special purpose of the corporation.

8.05 Loans. The corporation may, upon authorization of the board of directors, from time to time accept or negotiate loans of financial assistance to be repaid at such time as the corporation is reasonably able to repay.

ARTICLE 9. INDEMNIFICATION OF DIRECTORS AND OFFICERS

9.01 Indemnification of Directors and Officers. Except as otherwise expressly provided by law or these bylaws, each director or officer, whether or not then in office, shall be indemnified by the Corporation against all expenses reasonably incurred by or imposed upon him in connection with or arising out of any proceeding in which he may be involved by reason of his being or having been a director or officer of the Corporation. The foregoing right of indemnification shall not be exclusive of other rights to which any director or officer may be entitled as a matter of law.

9.02 Power to Indemnify. The power to indemnify applies only if it is determined that the director or officer (a) acted in good faith, (b) reasonably believed that his conduct in his official capacity was in the corporation's best interests, and in all other cases, that his conduct was at least not opposed to the corporation's best interests, and (c) in the case of any criminal proceedings, did not have a reasonable cause to believe his conduct was unlawful.

9.03 Limitations. If the director or officer is found liable to the corporation or is found liable because he improperly received a personal benefit, the indemnification in Section 9.01 (a) is limited to reasonable expenses (which shall not include a judgment, a penalty, a fine or tax) actually incurred by the person in connection with the proceeding and (b) may not be made in relation to a proceeding in which the person has been found liable for (i) willful or intentional misconduct in the performance of his duty to the corporation, (ii) breach of his duty of loyalty owed to the corporation or (iii) an act or omission not committed in good faith that constitutes a breach of duty owed by the person to the corporation..

9.04 Proceeding. "Proceeding" means a threatened, pending or completed action or other proceeding, whether civil, criminal, administrative, arbitrative or investigative, an appeal of such an action or proceeding and an inquiry or investigation that could lead to such an action or proceeding.

9.05 Expenses. "Expenses" includes court costs, a judgment (including an arbitration award), a penalty, a settlement, a fine, and an excise or similar tax, including an excise tax assessed against the person with respect to an employee benefit plan and reasonable attorneys' fees that are reasonable and actually incurred by the person in connection with a proceeding.

9.06 Determination of Indemnification. A determination of indemnification under Section 9.01 (unless ordered by a court of competent jurisdiction) must be made:

1. by a majority vote of a quorum consisting of directors who at the time of the vote are not named defendants or respondents in the proceeding;

2. If such a quorum cannot be obtained, by a majority vote of a committee of the board of directors, designated to act in the matter by a majority vote of all directors, consisting solely of two or more directors who at the time of the vote are not named defendants or respondents in the proceeding;

3. by special legal counsel selected by the board of directors or a committee of the board by vote as set forth in subsection 1 or 2 of this section; or, if such a quorum cannot be obtained and such a committee cannot be established, by a majority vote of all directors; or

4. by the members in a vote that excludes the vote of directors who are named defendants or respondents in the proceeding.

9.07 Mandatory Indemnification. The corporation shall indemnify a director or officer against reasonable expenses actually incurred by him in connection with a proceeding in which he is a named defendant or respondent because he is or was a director or officer if he has been wholly successful, on the merits or otherwise, in the defense of the proceeding.

9.08 Advancement of Reasonable Expenses. Reasonable expenses incurred by a director or officer who was, is, or is threatened to be made a named defendant or respondent in a proceeding shall be paid or reimbursed by the corporation, in advance of the final disposition of the proceeding and without the determination specified in Section 9.06, after the corporation receives a written affirmation by the director or officer of his good faith that he has met the standard of conduct necessary for indemnification under this article and a written undertaking by or on behalf of the director or officer to repay the amount paid or reimbursed if it is ultimately determined that he has not met that standard or if it is ultimately determined that indemnification of the director or officer against expenses incurred by him in connection with that proceeding is prohibited under this article. The written undertaking must be an unlimited general obligation of the director or officer but need not be secured. It may be accepted without reference to financial ability to make repayment.

9.09 Payment as Witness. The corporation shall pay or reimburse expenses incurred by a director, officer or employee in connection with his appearance as a witness or other participation in a proceeding by or against the corporation at a time when he is not a named defendant or respondent in the proceeding.

9.10 Insurance. The corporation may purchase and maintain insurance or enter into any other arrangement on behalf of any person who is or was a director, officer, employee or agent of the corporation or who is or was serving at the request of the corporation as a director, officer, partner, venturer, proprietor, trustee, employee, agent, or similar functionary of another foreign or domestic corporation, employee benefit plan, other enterprise, or other entity, against any liability asserted against him and incurred by him in such a capacity or arising out of his status as such a person, whether or not the corporation would have the power to indemnify him against that liability under this article. Without limiting the power of the corporation to procure or maintain any kind of other arrangement, the corporation may, for the benefit of persons indemnified by the corporation, (a) create a trust fund; (b) establish any form of self-insurance; (c) secure its indemnity obligation by grant of a security interest or other lien on the assets of the corporation; or (d) establish a letter of credit, guaranty, or surety arrangement.

9.11 Exclusions. No indemnification by the corporation shall apply to (a) any claim arising out of bodily injury to, or sickness, disease or death of any person, or damage to or destruction of any

property including the loss of use thereof, (b) any claim arising out of breach of fiduciary duty or obligation in connection with any employee welfare benefit plan or retirement plan, (c) any cross-claim or counterclaim brought by one director and/or officer against another director and/or officer, (d) any claim arising out of failure to effect or maintain any insurance or bond, (e) any claim arising out of acts of a knowingly discriminatory nature, (f) any claim arising out of a violation of the responsibilities, obligations or duties imposed by Internal Revenue Code of 1986, as amended, or similar statutory law of any state or other jurisdiction therein, or (h) any act committed by a director or officer prior to taking office.

9.12 Notice. A director or officer shall, as a condition precedent to indemnification hereunder, give written notice to the corporation as soon as practicable of any claim made against him. The director or officer shall promptly forward to the corporation any demand, notice or summons received by the director or officer. Notice given by or on behalf of the director or officer to any authorized representative of the corporation, with particulars sufficient to identify the director or officer, shall be deemed notice to the corporation.

9.13 Jurisdiction. The indemnification hereunder only applies to acts committed by and suits brought against a director or officer in the United States of America, its territories or possessions or Canada.

9.14 Cooperation. The director or officer shall cooperate with the corporation and, upon the corporation's request, assist in making settlements and in the conduct of suits, including arbitration proceedings. The director or officer shall attend hearings, trials and depositions and shall assist in securing and giving evidence and obtain the attendance of witnesses. The director or officer shall not, except at his own cost, voluntarily make any payment, assume any obligation or incur any expenses in any such proceedings.

9.15 Liability. No action shall lie against the corporation unless, as a condition precedent thereto, the director or officer shall have fully complied with all the terms, provisions and conditions of this entire article nor until the amount of the obligation to pay shall have been finally determined either by judgment against the director or officer after actual trial, arbitration determination, or by written agreement of the director or officer and the claimant subject to the prior written consent of the corporation. Any person or organization or the legal representative thereof who has secured such judgment or written agreement shall thereafter be entitled to recover against the corporation. No person or organization shall have the right to join the corporation as a party to any action against the director or officer to determine the director's or officer's liability, nor shall the corporation be interpleaded by the director or officer or their legal representative.

9.16 Subrogation. In the event of any payment under this article, the corporation shall be subrogated to all the director's or officer's rights of recovery therefore against any person or organization, and the director or officer shall execute and deliver all instruments and papers and do whatever else is necessary to secure such rights. Any amount recovered in excess of the corporation's total payment shall be restored to the director or officer, less the cost to the corporation of recovery. This indemnification as proved shall apply only as excess over any valid and collectible insurance the director or officer may have.

9.17 Effect of Amendment. No amendment, modification or repeal of the articles on indemnification and insurance hereof shall in any manner terminate, reduce or impair the right of any past, present or future director or officer of the corporation, nor the obligation of the corporation to

indemnify such directors, under and in accordance with the provisions of these articles as in effect immediately prior to such amendment, modification or repeal with respect to claims arising from or relating to matters occurring, in whole or in part, prior to such amendment, modification or repeal, regardless of when such claims may arise or be asserted.

9.18 Surety Bond. Such officers and agents of the corporation as the president, board of directors or the executive committee may designate from time to time, may be bonded for the faithful performance of their duties to the corporation and for the restoration to the corporation, in case of their death, resignation, retirement, disqualification or removal from office, of all books, papers, vouchers, money and other property of whatever kind in their possession or under their control belonging to the corporation, in such amounts and by such surety companies as the president, board of directors or the executive committee may determine. The premiums on such surety bonds shall be paid by the corporation and the bonds so furnished shall be in the custody of the secretary of the corporation.

ARTICLE 10. PROHIBITED ACTS

10.01 Dividends Prohibited. A dividend may not be paid to, and no part of the income of the corporation may be distributed to, the corporation's members, directors or officers.

10.02 Authorized Benefits and Distributions. The corporation may pay compensation in a reasonable amount to the members, directors or officers for services rendered and may confer benefits on its members in conformity with the corporation's purposes.

10.03 Loans To Directors Prohibited. No loans shall be made by the corporation to its directors.

ARTICLE 11. DISSOLUTION AND DISTRIBUTION OF ASSETS

11.01 Voluntary Dissolution. The corporation may dissolve and commence to wind up its affairs. The board of directors shall adopt a resolution recommending that the corporation be dissolved and directing that the question of such dissolution be submitted to a vote at an annual or special meeting of members having voting rights. A resolution to dissolve the corporation shall be adopted upon receiving at least two-thirds (2/3) of the votes which members present at such meeting in person or by proxy are entitled to cast. Upon the adoption of such resolution by the members, the corporation shall cease to conduct its affairs except in so far as may be necessary for the winding up thereof, shall immediately cause a notice of the proposed dissolution to be mailed to each known creditor of and claimant against the corporation and shall proceed to collect its assets and apply and distribute them as provided in these bylaws or as allowed by law.

11.02 Application and Distribution of Assets. If in the process of dissolution, all valid and legally enforceable liabilities and obligations of the corporation shall be paid, satisfied and discharged. In case the property and assets are not sufficient to satisfy or discharge all of the corporation's valid and legally enforceable liabilities and obligations, the corporation shall apply them so far as they will go to the just and equitable payment of the liabilities and obligations. Assets held by the corporation upon condition requiring return, transfer or conveyance, which condition occurs by reason of the dissolution, shall be returned, transferred or conveyed in accordance with such requirements. The remaining assets of the corporation shall be distributed only for tax exempt purposes to one or more organizations which are

exempt under Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding section of any future federal tax code, or which are described in Section 170(c)(1) or (2), Internal Revenue Code, under a plan of distribution adopted pursuant to applicable law. Any remaining assets not distributed under the plan of distribution shall be disposed of by a district court of the county in which corporation's principal office is located exclusively to one or more exempt organizations described above. Any distribution by the court shall be made in such manner as, in the judgment of the court, will best accomplish the general purposes for which the corporation was organized.

ARTICLE 12. GENERAL PROVISIONS

12.01 Fiscal Year. The fiscal year of the corporation shall begin the first day of January and end on the last day of December in each year.

12.02 Seal. The corporate seal shall be in such form as may be prescribed by the board of directors. The seal may be used by causing it or a facsimile thereof to be impressed or affixed or in any manner reproduced.

12.03 Books and Records. The corporation shall keep correct and complete books and records of account and shall also keep minutes of the proceedings of its members, board of directors and committees having any authority of the board of directors and shall keep at its principal office a record of the names and addresses of its members entitled to vote. A member of the corporation, on written demand stating the purpose of the demand, has the right to examine and copy, in person or by agent, accountant or attorney, at any reasonable time during normal business hours, for any proper purpose, the books and records of the corporation relevant to that purpose, at the expense of the member. However, since membership information of the corporation is a valuable and proprietary asset of the corporation, such information may not be given or sold to, or be copied by, any member or his agent or attorney. The corporation may be audited annually by certified public accountants selected by the board of directors.

12.04 Amendment of Articles of Incorporation. A proposed amendment to the articles of incorporation of the corporation shall be adopted at a special or annual meeting of members called for such purpose, upon receiving at least two-thirds (2/3) of the votes which members present at such meeting in person or by proxy are entitled to cast at which a quorum is present.

12.05 Amendment of Bylaws. The bylaws may be altered, amended or repealed or new bylaws may be adopted upon receiving a vote of a majority of the board of directors present in person or by proxy at a special or annual meeting at which a quorum is present.

12.06 Waiver of Notice. Notice of a meeting is not required to be given to a member, director or member of a committee if the person entitled to notice signs a written waiver of notice of the meeting, regardless of whether the waiver is signed before or after the time of the meeting. Attendance at a meeting constitutes a waiver of notice of such meeting, unless the person participates in or attends the meeting solely to object to the transaction of business at the meeting on the ground that the meeting was not lawfully called or convened.

12.07 Governing Law. These bylaws shall be construed under and in accordance with the laws of the State of Texas.

12.08 Construction. The gender of all words used in these bylaws includes the masculine,

feminine, and neuter. Headings of all articles and sections are for reference purposes only and shall not constitute substantive matter to be considered in construing the terms of these bylaws.

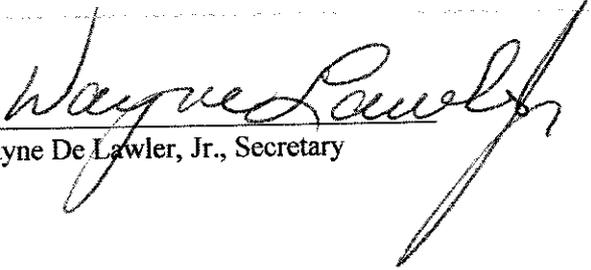
12.09 Counterparts. These bylaws may be executed in any number of counterparts with the same effect as if all signing parties had signed the same document. All counterparts shall be construed together and constitute the same instrument.

12.10 Procedures. Parliamentary procedures for all meetings shall be conducted in accordance with the latest revised edition of Robert's Rules of Order, unless otherwise inconsistent with these bylaws or by resolution of the board of directors.

CERTIFICATE OF SECRETARY

The undersigned, being the duly elected Secretary of the Corporation, hereby certifies that the foregoing Bylaws were duly adopted, approved, authorized and ratified by the unanimous written consent of the Board of Directors of the Corporation and the same do now constitute the Bylaws of the Corporation.

Dated and Effective February 20, 2007.


Wayne De Lawler, Jr., Secretary



RECEIVED
2-6-89

The State of Texas

Secretary of State

JAN. 31, 1989

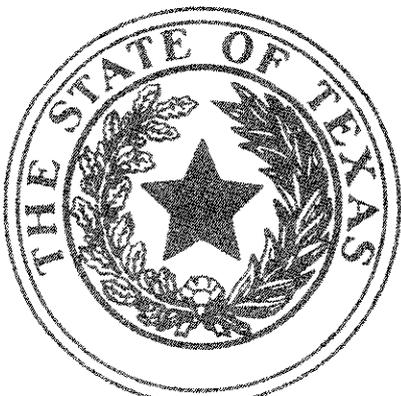
WAYNE D. LAWLER JR.
5050 DUDRUM DRIVE SUITE 700
DALLAS TX 75240

RE:
NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION
CHARTER NUMBER 01103286-01

IT HAS BEEN OUR PLEASURE TO APPROVE AND PLACE ON RECORD THE ARTICLES OF INCORPORATION THAT CREATED YOUR CORPORATION. WE EXTEND OUR BEST WISHES FOR SUCCESS IN YOUR NEW VENTURE.

AS A CORPORATION, YOU ARE SUBJECT TO STATE TAX LAWS. SOME NON-PROFIT CORPORATIONS ARE EXEMPT FROM THE PAYMENT OF FRANCHISE TAXES AND MAY ALSO BE EXEMPT FROM THE PAYMENT OF SALES AND USE TAX ON THE PURCHASE OF TAXABLE ITEMS. IF YOU FEEL THAT UNDER THE LAW YOUR CORPORATION IS ENTITLED TO BE EXEMPT YOU MUST APPLY TO THE COMPTROLLER OF PUBLIC ACCOUNTS FOR THE EXEMPTION. THE SECRETARY OF STATE CANNOT MAKE SUCH DETERMINATION FOR YOUR CORPORATION.

IF WE CAN BE OF FURTHER SERVICE AT ANY TIME, PLEASE LET US KNOW.



VERY TRULY YOURS,

Paul M. Reins

Secretary of State



The State of Texas
Secretary of State

CERTIFICATE OF INCORPORATION

OF

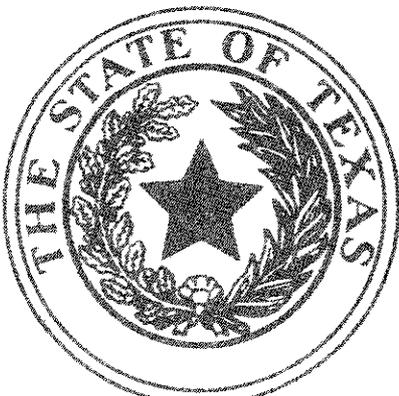
NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION
CHARTER NUMBER 01103286

THE UNDERSIGNED, AS SECRETARY OF STATE OF THE STATE OF TEXAS, HEREBY CERTIFIES THAT ARTICLES OF INCORPORATION FOR THE ABOVE CORPORATION, DULY SIGNED AND VERIFIED HAVE BEEN RECEIVED IN THIS OFFICE AND ARE FOUND TO CONFORM TO LAW.

ACCORDINGLY THE UNDERSIGNED, AS SUCH SECRETARY OF STATE, AND BY VIRTUE OF THE AUTHORITY VESTED IN THE SECRETARY BY LAW, HEREBY ISSUES THIS CERTIFICATE OF INCORPORATION AND ATTACHES HERETO A COPY OF THE ARTICLES OF INCORPORATION.

ISSUANCE OF THIS CERTIFICATE OF INCORPORATION DOES NOT AUTHORIZE THE USE OF A CORPORATE NAME IN THIS STATE IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER THE FEDERAL TRADEMARK ACT OF 1946, THE TEXAS TRADEMARK LAW, THE ASSUMED BUSINESS OR PROFESSIONAL NAME ACT OR THE COMMON LAW.

DATED JAN. 26, 1989



Carl M. Reims
Secretary of State

FILED
In the Office of the
Secretary of State of Texas

JAN 26 1989

Clerk I-B
Corporations Section

ARTICLES OF INCORPORATION
OF
NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION

ARTICLE ONE

The name of the corporation is NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION.

ARTICLE TWO

The corporation is a non-profit corporation.

ARTICLE THREE

The period of its duration is perpetual.

ARTICLE FOUR

The purposes for which the corporation is organized are:

- * To exercise all rights and powers conferred on non-profit corporations under the laws of the State of Texas, or which may hereafter be conferred;
- * To educate members about consumer rights and to create consumer awareness of nationwide pricing differences between goods and services;
- * To make available to members various discounted goods and services as they are offered to the association;
- * To educate members about sound business practices and opportunities and to promote free enterprise;
- * To educate members in matters of personal financial planning and to maximize quality of life economically and through health awareness programs.

ARTICLE FIVE

Membership in this corporation or association shall be open to all persons, without discrimination, who are interested in the aims and purposes of the corporation and who are otherwise qualified under the provisions set forth in the By-Laws.

ARTICLE SIX

No part of the net earnings of the corporation shall inure to the benefit of any director, officer, member or other private individual (except that reasonable compensation may be paid for services rendered to or for the corporation affecting one or more of its purposes).

Notwithstanding any other provision of these Articles of Incorporation, the corporation shall not conduct or carry on any activities not permitted to be conducted or carried on by an organization exempt from taxation under Section 501(c)(3) under the Internal Revenue Code and its Regulations as they now exist or as they may hereafter be amended.

ARTICLE SEVEN

The right to vote on any and all matters affecting the corporation or its members shall be limited to the Board of Directors.

ARTICLE EIGHT

The Board of Directors may establish a class or classes of members without the right to vote.

ARTICLE NINE

A director shall not be personally liable to the corporation or its members for monetary damages for any act or omission in the capacity as a director, except for: a breach of a director's duty of loyalty to the corporation or its members; an act or omission not in good faith or that involves intentional misconduct or a knowing violation of the law; a transaction from which a director received an improper benefit, whether or not the benefit resulted from an action taken within the scope of the director's office; or an act or omission for which the liability of a director is expressly provided for by statute.

ARTICLE TEN

The street address of the initial registered office of the corporation is 6210 Campbell Road, Suite 100, Dallas, Texas 75248. The name of its initial registered agent is J. Ross Hopkin.

ARTICLE ELEVEN

The number of Directors constituting the initial Board of Directors is Three (3) and the names and addresses of the persons who are to serve as the initial Directors are:

NAME

ADDRESS

J. Ross Hopkin

6210 Campbell Road, Suite 100
Dallas, Texas 75248

Randall H. Nance

6210 Campbell Road, Suite 100
Dallas, Texas 75248

Wayne D. Lawler, Jr.

5050 Quorum Drive, Suite 700
Dallas, Texas 75240

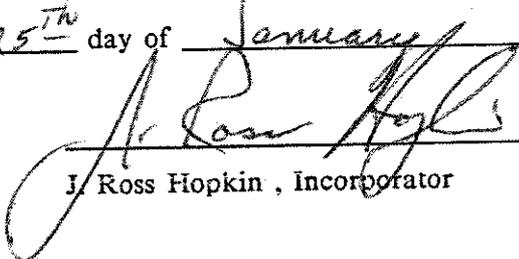
ARTICLE TWELVE

Upon the dissolution of the corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities and obligations of the corporation, dispose of all of the assets of the corporation exclusively for the purposes of the corporation in such manner, or to such organization or organizations organized and operated exclusively for charitable, education, religion, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code or the corresponding provision of any future law, as the Board of Directors shall determine.

ARTICLE THIRTEEN

The name and street address of each incorporator is J. Ross Hopkin, 6210 Campbell, Suite 100, Dallas, Texas 75248.

DATED and EXECUTED this 25TH day of January, 19 89.



J. Ross Hopkin, Incorporator



The State of Texas

Secretary of State

MAY 1, 1995

J. ROSS HOPKIN
6210 CAMPBELL ROAD SUITE 100
DALLAS ,TX 75248

RE:
NATIONAL ASSOCIATED BUYING SERVICES ASSOCIATION
CHARTER NUMBER 01103286-01

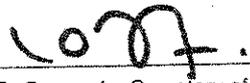
THIS IS TO ADVISE YOU THAT THE ABOVE REFERENCED CORPORATION'S
REPORT REQUIRED BY ARTICLE 1396-9.01, TEXAS NON-PROFIT CORPORATION
ACT, HAS BEEN FILED IN THIS OFFICE, AND YOUR REMITTANCE OF \$5.00 HAS
BEEN APPLIED AS THE FILING FEE FOR SAME.

AS THE LAW DOES NOT PROVIDE FOR THE FURNISHING OF A CERTIFICATE
OF FILING, THIS LETTER MAY BE USED AS EVIDENCE OF SUCH FILING.

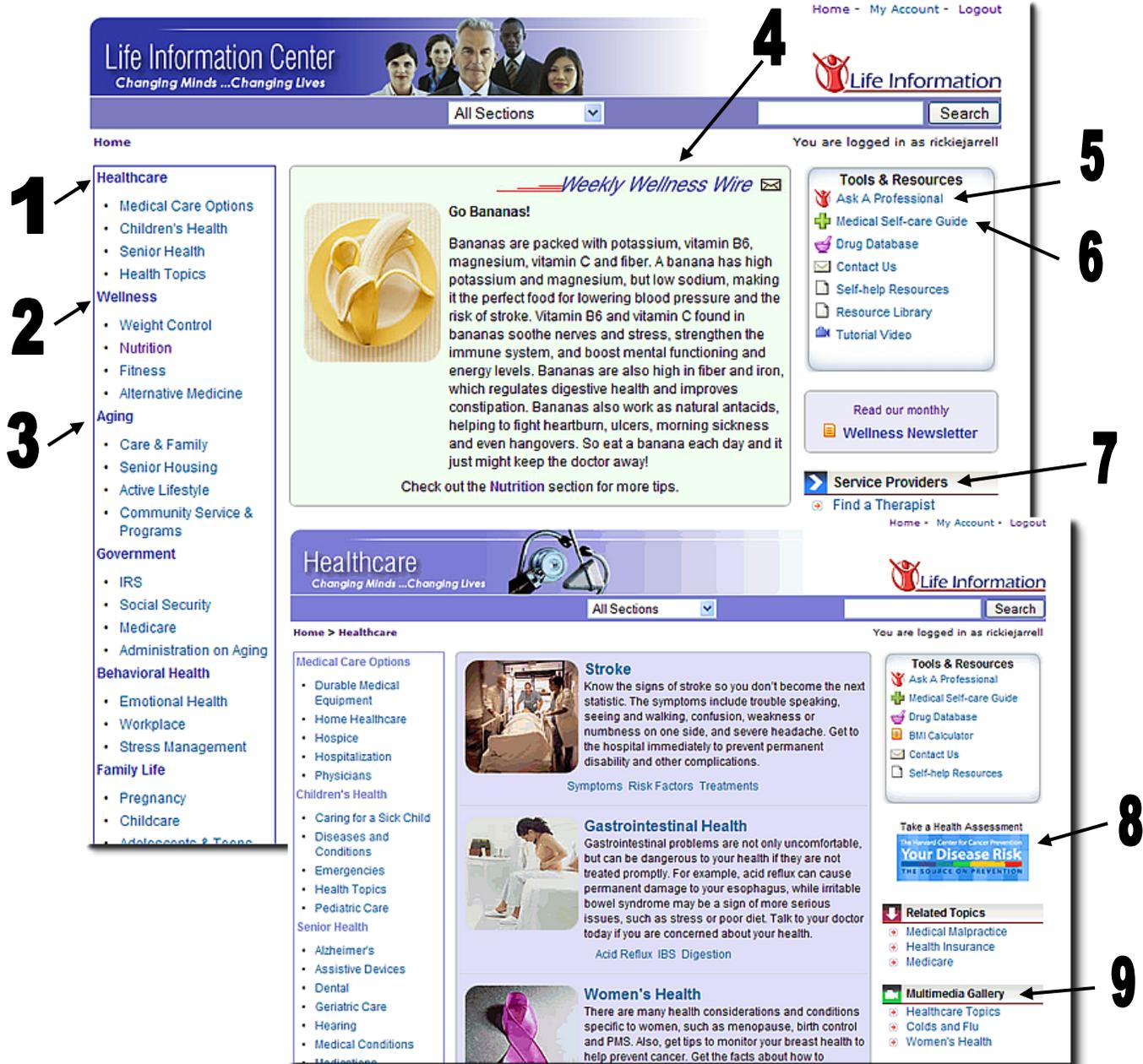
SINCERELY,

CORPORATIONS SECTION
STATUTORY FILINGS DIVISION




Antonio O. Garza, Jr., Secretary of State

Content Overview



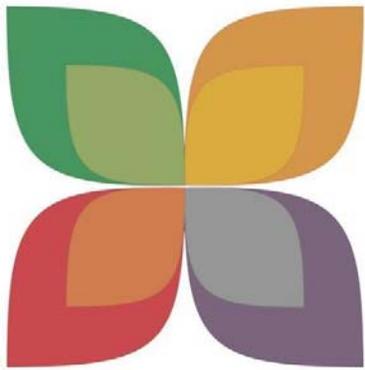
The screenshot displays the Life Information Center website interface. At the top, there is a navigation bar with the site logo and tagline 'Changing Minds ...Changing Lives'. Below this is a search bar and a dropdown menu for 'All Sections'. The main content area is divided into several sections:

- 1. Healthcare:** A vertical navigation menu on the left side, listing categories like Medical Care Options, Children's Health, Senior Health, Health Topics, Wellness, Aging, Government, Behavioral Health, and Family Life.
- 2. Wellness:** A sub-section within the Healthcare menu, listing topics like Weight Control, Nutrition, Fitness, and Alternative Medicine.
- 3. Aging:** Another sub-section within the Healthcare menu, listing topics like Care & Family, Senior Housing, Active Lifestyle, and Community Service & Programs.
- 4. Weekly Wellness Wire:** A featured article titled 'Go Bananas!' with an image of a banana and text about its health benefits.
- 5. Ask a Professional:** A button in the 'Tools & Resources' section for email consultation.
- 6. Medical Self-care Guide:** A button in the 'Tools & Resources' section for self-care information.
- 7. Service Providers:** A button in the 'Tools & Resources' section for finding therapists.
- 8. Your Disease Risk:** A button for a health assessment tool, part of a 'Take a Health Assessment' section.
- 9. Multimedia Gallery:** A button in the 'Related Topics' section for interactive content.

Representative Features – All available in Spanish at the click of a button

1. Healthcare – Everything you need to know is right at your fingertips in Question & Answer format.
2. Wellness – Get all the latest information, including holistic and alternative medicine.
3. Aging – Resources for housing options, active lifestyles, community services and programs and much more.
4. Weekly Wellness Wires – Stay up-to-date with healthy tips.
5. Ask a Professional – Email consultation with physicians, behavioral health counselors and nutritionists.
6. Medical Self-Care Guide – Find out how to care for yourself at home or when to call our 24/7 Nurse Line.
7. Service Providers – Search the nationwide databases for your needs.
8. Your Disease Risk – Take a health assessment online to determine your risks.
9. Multimedia Gallery – Learn about health and medical conditions interactively.

*For more information about Life Information, contact Brad Thorson at 972-381-4690.



SNAP lifestyles

Savings Network Access Program



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HOW TO ACCESS SAVINGS

Powered by:



Entertainment Section

Movie Tickets	<p>Get Tickets to the theaters listed below for \$6.50 per ticket.</p> <p>Regal Cinemas, United Artist Theaters, Edwards Theaters, AMC Theaters, Loews Theaters, Star Theaters, Magic Johnson Theaters.</p> <p>To access this program go to www.nbbimovieform.com, print the form and follow the directions indicated on the form.</p>
Theme Parks	<p>Save on vacation deals to some of the finest Theme Parks in America</p> <p>Sea World Orlando, Sea World San Diego, Sea World San Antonio, Busch Gardens Williamsburg, Sesame Street, Busch Gardens Tampa, Adventure Island, Water Country USA.</p> <p>To access this benefit go to www.nbbithemeparks.com and click on the Tickets and Vacations GO button.</p> <p>You then have two options; 1) print as many coupons as you need for “at the door savings” or, 2) purchase e-tickets on-line and get additional savings.</p>
Dining	<p>Members get access to dining certificates at greatly reduced rates for local restaurants throughout the country.</p> <p>Go to www.nbbidining.com At check out enter discount code nbbi</p>

Health Section

Fitness Program	<p>We have arranged for members and their families to take advantage of a unique Fitness Program.</p> <p>Everyday benefits include:</p> <ul style="list-style-type: none"> ● Access to over 1,500 top fitness clubs nationwide ● Guaranteed lowest rates, with up to 60% savings on monthly dues ● Month-to-month memberships - no long-term contracts ● Additional discounts for family members ● Discounts on exercise videos, workout equipment, fitness gear etc. <p style="text-align: center;">Find A Club – Try A Club – Join A Club Lowest Price Guarantee</p> <p>To Access this program go to www.nbbifitness.com and enroll in your favorite club.</p>
Prescription Drugs	<p>Receive discounts that average 15 % on brand-named drugs and average 55% on Generic drugs</p> <p>To access this program go to: jz.usadrugplan.com and download your free card.</p>
Medical Negotiations	<p>Get professional help on negotiating those high medical bills.</p> <p>To access this program call (866) 935 0407 or go to www.nbbipa.com</p>
Vitamins	<p>Take an additional 5% off this already deeply discounted vitamin program.</p> <p>To access this program go to www.nbbivitamins.com and enter promo code NBBI0608 (all caps).</p>

Hearing	Save 20 to 50% off manufacturers suggested retail pricing on hearing supplies. To Access This Benefit Call (866) 956-5400 give the Promo code 9086 or NBBi
Medical Supplies	Save an additional 10% off the already discounted cost on durable medical equipment. To access this program simply go online and visit the website at www.nbbimedsupplies.com. When you have made your selection and are checking out, use the coupon code NBB 10. You can also place your order over the phone at (800) 278-0227.
Diabetic Supplies	Save up to 60% every day – Thousands of brand name diabetic supplies, medical equipment and health care products at great prices. Members receive an extra 8% discount on top of the already low prices. To access this benefit simply go to www.nbbidiabeticsupplies.com Fill out the necessary information, at closing enter the member code nbbi8 or call (877) 241-9002 and give the member code NBBi8
Shopping Section	
Carpet Savings	Without showroom overhead, or pushy salesmen to pay, all we can do is SAVE YOU MONEY! 50% - 70% off retail prices! Residential and commercial carpet straight from S&S Mills. To access this program simply call (800) 241-4013 between the hours of 8:00 a.m. and 10:00 p.m. Eastern Standard Time to discuss your carpet needs and to order your free sample portfolio or go to: www.nbbicarpets.com.
Coupon & Promo Codes	This site is the cool place for hot deals, groceries coupons and other products, coupon codes, promotional codes, promotions, free stuff, freebies and much more. To access this program go to www.nbbicoupons.com and register. When registered enter your zip code and put a check mark in the box next to the coupons you want and press print. It is that simple!
Flowers	Save 15% on all types of plants and flowers “direct from the farm to consumer” company with a freshness guarantee. To access this program simply go to www.nbbiflowers.com and enter Member Code nbb or Call 1-800-776-3569 and give the member code nbb
GreenBackStreet	Do you shop online? How much cash do you get back for shopping online? If nothing, would you like to get cash back? If you shop at one of our 1100 vendors you get cash every time you shop online. Some examples are 7.7% at target, 4.4% JC Penney, 4.4% Macy's 7.7% Sharper image, 5.5% Home Depot, 3.3% Office Depot. No other shopping program can match this free cash back savings program. To access this program go to: www.kc10green.com and sign up as a free member and start saving.
Magazines	Access discounts up to 90% off the subscription price of over 1,000 magazines. To access this program simply go to: www.nbbimagazines.com or call 1 (800) 959-1676 and give the code nbbi
MegaMall	Offers you top quality products and services, from reputable names you can trust like Wal-marthalf.com, Target, Overstock, Buy.com and over 300 stores at your fingertips! To access this program go to www.nbbimegamall.com

Travel Program

<p>Hotels</p>	<p>Get discounts up to 15% at: Comfort Inn, Comfort Suites, Quality Inn, Sleep Inn, Clarion, Cambria Suites, Mainstay Suites, Surburban Suites, Econo Lodge, Rodeway Inn.</p> <p>To access call: 1-800-424 6423 Use Corporate Code 00064979 Online: visit www.choicehotels.com. Click on “Enter Your Special Rate ID” (located above the yellow arrow), enter the Corporate Code 00064979 and confirm the name National Benefit Builders Inc.</p> <p>To Access discounts up to 15% at: Days Inn...1-800-329-7466, Ramada...1-800-272-6232, Howard Johnson...1-800-146-4656, Knights Inn...1-800-843-5644, Travelodge...1-800-578-7878, Wingate...1-800-228-1000, Amerihost...1-800-434-5800, Super 8 Motels...1-800-800-8000, Baymont Inn...1-877-229-6668 For these hotels give the operator Code 26146</p>
<p>Travel</p>	<p>Save up to 30% on Tours, Cruises, Airlines, and Car Rentals etc. There are also additional hotel discounts through this service</p> <p>To access this program simply go to: www.nbbitravel.com or call (888) 679-8176 and give them your Member Code nbbi.</p>
<p>Funeral Concierge</p>	<p>Everest is an independent consumer advocate whose sole purpose is to provide the information you need to make the most informed decisions about all funeral related issues, and then put your wishes into action.</p> <p>NBBI members are entitled to a \$50 discount Purchase options include:</p> <ul style="list-style-type: none"> • Annual Option \$48 / \$68 (Discount applied to \$95 enrollment fee) • Lifetime Option \$495 / \$695(Discount applied to one-time fee) <p>To access your \$50 discount go to www.nbbifuneral.com and enter discount code: NBBI or for more information about the program call 1-800-913-8318 to talk to an advisor.</p>
<h2 style="text-align: center;">Vehicle Savings Program</h2>	
<p>Auto Lube</p>	<p>Save \$5 on Jiffy lube’s Signature Service oil change at any participating Jiffy Lube location in the United States.</p> <p>To Access this Program go to www.nbbilube.com and download your \$5.00 coupon</p>
<p>Auto Purchasing</p>	<p>Have an expert do all the work for you in purchasing or leasing all types of vehicles, including automobiles, RV’s, Farm equipment, boats, etc</p> <p>To access this program go to www.nbbivehiclepurchase.com and use Member Code nbbi-2</p>
<p>Auto Rental</p>	<p>Get up to 25% off car rentals at Hertz, Budget and Avis. To get up to 25% discounts on car rentals call the numbers below: Hertz.....1-800-654-2200 use Member ID Code 1787255 Budget..1-800-527-0700 use Member ID Code Z523600 Avis.....1-800-331 1212 use Member ID Code G548600</p> <p>You can also access discounts from other car rental agencies by going to your travel service at : www.nbbitravel.com use Member Code nbbi or call (888) 679-8176 and give them your Member Code nbbi</p>

<p>Auto Repair</p>	<p>Members receive a 10% point of sale discount off the price of exhaust system repair, brake system repair, shocks and struts, coil springs, CV Joint and front end alignment at participating Meineke Car Centers. There is also 5% point of sale discount off tires & Batteries</p> <p>To access the Meineke discount coupon go to www.nbbicarrepair.com and click on print.</p>
<p>Motor Home Rentals</p>	<p>Take a Cruise America Motor Home Holiday your way and save 10% off time and mileage charges on Cruise America and Cruise Canada vehicles.</p> <p>For Reservations in the US and Canada Call: 1(800) 327-7799. You must mention that you are affiliated with nbbi</p>
<p>Moving & Storage</p>	<p>Discounts from National Van Lines or Allied Van Lines</p> <p>As a member you receive the following basic discounts on interstate moves:</p> <ol style="list-style-type: none"> 1. Substantial bottom line discounts 2. 45% discount on storage related needs 3. 180 days of storage vs. 90 days 4. No 'Peak Season" rates (normally 10% higher June through August) <p>North American Van Lines number to call: 800.524.5533 Allied Van Lines: number to call: 800.871.8864 Mention the name of your group and use the code nbbi</p>
<p>Truck Rental</p>	<p>Budget Truck Rental. Save 15% on truck rentals.</p> <p>To access this benefit Call (800) 566-8422 Use Promo code 56000101835</p>
<p>Roadside Assistance</p>	<p>Roadside Service is provided to members at the discounted fleet rate of \$ 69.95 for most roadside services. Hook up and tow service is up to 5 miles.</p> <p>To Access this program call (866) 809-5105 Give them the name NBBi</p>
<p>Relocation Section</p>	
<p>Moving Discounts</p>	<p>Members can receive MEMBER PREFERRED discounts of 50% or more on interstate (state to state) moving, in-transit, and personal property protection coverage from two leading national van lines.</p> <p>To access the moving & storage discounts (see moving & storage in the vehicle savings section)</p>
<p>Real Estate Services</p>	<p>Members can get expert guidance, a knowledgeable local real estate agent. And cash rewards when buying a home.</p> <ul style="list-style-type: none"> ● Members receive professional counseling to guide you through the home buying and/or selling process. ● Member will be connected with a qualified local real estate agent to help you buy or sell a home. ● Get cash rewards of up to \$1,000 or more <p>To access this benefit call 1-800-593-2526 and mention NBBi</p>
<p>Mortgage Services</p>	<p>Members can get personal advice, a great mortgage rate, and reduced fees on a new home loan or refinance.</p> <p>As a Member you get:</p>

- Dedicated counselors to provide personalized mortgage guidance.
- VA mortgage option
- A full menu for new homes, refinances, vacation homes to meet your personal needs
- Fast approvals, with minimal paperwork simplified home financing.
- Competitive rates, low closing fees and a special \$300 reward for members will save you money

To access this benefit call 1-800-593-2526 and mention NBBi

RELOCATION BONUS REWARD

Earn an extra \$ 250.00 when you use the moving, real estate and mortgage services together for extra savings that can really add up

Pet Insurance & More

VIP Pet Insurance

VPI Pet Insurance policies covers thousand of medical problems and conditions related to accidents, emergencies, poisonings and illnesses (including Cancer)

- Coverage available for dogs, cats, birds and other exotics.
- Policies for cats are as little as \$10. per month with a \$50 per incident deductible.
- Helps pay for lab fees, treatments, prescriptions, surgeries and more, after a low \$50 per incident deductible.
- You can use any licensed veterinarian anywhere, even when you're away from home.
- Fast and efficient claims processing
- Multiple pet discounts available

To Access this program go to www.nbbipetinsurance.com



Features of the Life Information Center

Wellness Wires: Weekly emailed health and wellness tips.

Self-Help Resources: Medical Self-Care Guide, FamilyCare Organizer, Caregiver Guide, Foods to Cure and Prevent Illness Guide and more.

Healthcare and Mental Health Resource Library: 3,000 videos and articles.

National Service Providers By Zip Code: Healthcare, Senior Housing and Care Facilities. Over 500,000 listings.

Email a Healthcare Professional: Board Certified Physicians, Licensed Mental Health Professionals, 24-hour response, M-F.

Phone a Nurse: Bilingual Nurse Line.

Available 24/7.

Language Conversion: The Center converts to Spanish or French in one click.

Log on: www.lifeinformation.net

Username: NABS

Password: wellness

WE'VE GOT IT!

Wellness - We've got it!

Fitness - got it!

Monthly Newsletter - got it!

Weight Control - got it!

Nutrition - got it!

Weekly Wellness Wire - got it!

Health - We've got it!

Health Risk Assessments - got it!

Medical Self-care Guide - got it!

24/7 Bilingual Nurse Line - got it!

Healthcare Video Library - got it!

Behavioral Health - We've got it!

Workplace Skills - got it!

Emotional Health - got it!

Email a Professional - got it!

Stress Management - got it!

Self-help Groups - got it!

Balancing Work & Life - We've got it!

Family Life - got it!

Aging and Caregiving - got it!

Government Services - got it!

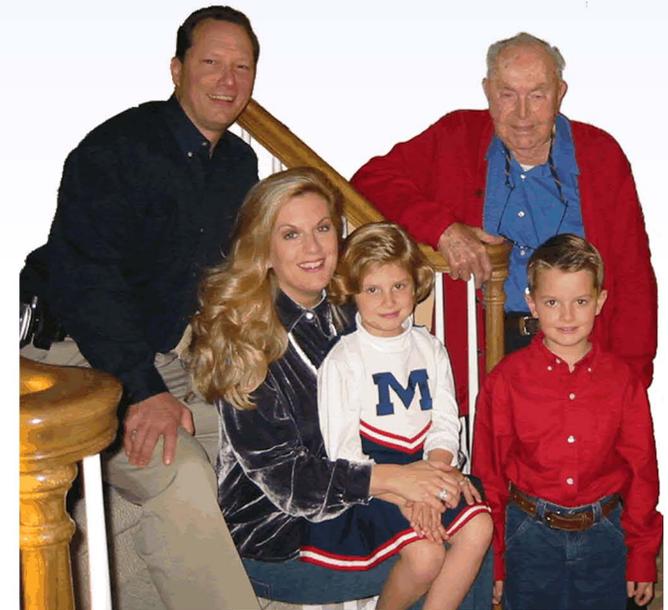
Benefits Management - got it!

Legal - got it!

Life is too precious to wait for answers.



Wellness Resources That Influence Behavior



The Life Information Center

Changing Minds...Changing Lives

Life Information Center



...what is the Life Information Center?

The Life Information Center is an online wellness program that encourages users to make a mental commitment to well-being, and also empowers them to live healthier lives. It equips users with the total wellness resources and specific daily life answers that help promote well-being, improve self-image and reduce the risk of illness and disease.

...what is the goal of the Center's wellness program?

The wellness goal of the Center is to provide complete resources that influence behavior, initiate lifestyle change, promote personal responsibility and facilitate self-care.

The Center features ongoing support for individual life changes by providing unmatched daily life resources and proactive materials.



...how does the Center influence behavior?

The Center influences behavior and supports change by encompassing all aspects of daily life that impact a person's mind, body and spirit. The Center's vast wellness resources, ongoing support materials and 24/7 accessibility help users to change behavior through small steps and positive reinforcement. It also empowers them to manage daily life issues. This leads users to a true state of wellness and lower healthcare costs.



...why is the Center an effective wellness resource ?

The first step in a successful wellness program is to help individuals make the mental commitment to change and maintain a positive mindset. The Center provides the resources and ongoing support materials to help users initiate change and effectively alter lifestyles.

"Negative people with poor self-images visit the doctor four times more often than those who have a healthy outlook on life."

...what makes the Life Information Center unique?

The Center is unique because it fully integrates the three most important daily life programs into one easy-to-use website:

Health and Wellness
Work/Life Balance
Behavioral Health

The Center not only focuses on wellness issues, such as physical fitness, nutrition and smoking cessation, but also on stress management. To lessen the impact that daily stressors have on wellness, the Center offers the industry's most comprehensive resources on family life, finances, aging, behavioral health, legal, government services and healthcare.

...does the Center utilize wellness support materials?

Yes! Lifestyle changes become long-term ONLY when there is reinforcement through repetitive support material and communication tools. The Center provides a host of weekly and monthly proactive support materials, including Wellness Wires, Wellness Calendars, Wellness Newsletters, Wellness Seminars and more. These resources guide users to the Center's Internet-delivered resources.

