

CRITICAL ILLNESS RIDER

(This rider is an integral part of the policy only when indicated in the Policy Specifications.)

INTERPRETATION

Unless otherwise specified, the terms used in this rider have the same definitions as those used in the policy to which this rider is attached.

DEFINITIONS

In this rider:

Accident means a sudden, fortuitous and unforeseeable event that causes, directly and independently of all other causes, bodily injuries exclusively due to an external cause that is of a violent nature and unintended by the insured, the owner or the beneficiary.

Accidental has the same meaning as the word "accident".

Age means the age of the insured on his or her birthday nearest the date of issue, as indicated in the Policy Specifications.

Beneficiary means the person or persons to whom the critical illness insurance benefit is payable. Unless specified otherwise in a written notice received at our head office, the insured is the beneficiary by default.

Covered critical illness any one of the following conditions, subject to the limits and exclusions specified in the policy or rider, as applicable:

- Accidental loss or limbs
- Aortic surgery
- Aplastic anemia
- Bacterial meningitis
- Blindness
- Cancer (life-threatening)
- Coma
- Coronary artery bypass surgery
- Heart attack
- Heart valve replacement or repair
- Kidney failure
- Major organ failure on waiting list
- Major organ transplant
- Paralysis due to an accident
- Severe burns
- Stroke (cerebrovascular accident)

Date of issue means the date of issue of this rider, as indicated in the Policy Specifications.

Illness means a deterioration of health or an organic dysfunction or disorder diagnosed by a physician. Pregnancy is not considered an illness, except in the case of physical or pathological complications.

Insured means the insured person under this rider, as indicated in the Policy Specifications.

“Of sound mind”: this expression means any situation in which the insured is not under the influence of narcotics, drugs, medication or alcohol or does not suffer from any psychological or nervous disorder that prevents him or her from forming intent.

Rider anniversary means the anniversary of the date of issue. Rider years are calculated from the date of issue.

Specialist means a licensed physician who has been trained in the specific area of medicine relevant to the covered critical illness for which a claim is submitted, and who has been certified by a specialty examining board. Specialist does not include the insured, the owner, or a person who is a member of the insured's or owner's immediate family.

Sum insured means the amount of critical illness insurance under this rider with regard to the insured, as indicated in the Policy Specifications.

Survival period means the minimum number of days following the date of diagnosis of a covered critical illness during which the insured must survive in order for a critical illness insurance benefit to become payable. The survival period does not include the number of days the insured is kept alive by artificial means.

COVERED CRITICAL ILLNESSES

Accidental Loss of Limbs

A definite diagnosis of the complete severance of two or more limbs at or above the wrist or ankle joint as the result of an accident or medically required amputation due to an accident. The diagnosis of accidental loss of limbs must be made by a specialist.

Survival period

The 30-day period following the date the second limb is severed.

Exclusion

No benefit will be payable under the definition of “Accidental Loss of Limbs” if an amputation is medically required due to any reason other than an accident.

Aortic Surgery

The undergoing of surgery for disease of the aorta requiring excision and surgical replacement of any part of the diseased aorta with a graft. Aorta means the thoracic and abdominal aorta but not its branches. The surgery must be determined to be medically necessary by a specialist.

Survival period

The 30-day period following the date of surgery.

Exclusion

No benefit will be payable under the definition of “Aortic Surgery” for angioplasty, intra-arterial procedures, percutaneous transcatheter procedures or non-surgical procedures.

Aplastic Anemia

A definite diagnosis of a chronic persistent bone marrow failure, confirmed by biopsy, which results in anemia, neutropenia and thrombocytopenia requiring blood product transfusion and treatment with at least one of the following:

- marrow stimulating agents;
- immunosuppressive agents;
- bone marrow transplantation.

The diagnosis of aplastic anemia must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Bacterial Meningitis

A definite diagnosis of meningitis, confirmed by cerebrospinal fluid showing growth of pathogenic bacteria in culture, resulting in neurological deficit documented for at least 90 days from the date of diagnosis. The diagnosis of bacterial meningitis must be made by a specialist.

Survival period

The survival period is satisfied once the above conditions have been met.

Exclusion

No benefit will be payable under the definition of "Bacterial Meningitis" for viral meningitis.

Blindness

A definite diagnosis of the total and irreversible loss of vision in both eyes, evidenced by:

- the corrected visual acuity being 20/200 or less in both eyes; or,
- the field of vision being less than 20 degrees in both eyes.

The diagnosis of blindness must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Cancer (Life-Threatening)

A definite diagnosis of a tumor characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis of cancer must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Exclusions

No benefit will be payable under the definition of "Cancer (Life-Threatening)" for the following cancers:

- carcinoma in situ; or
- stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness, not ulcerated and without Clark level IV or level V invasion); or
- any non-melanoma skin cancer that has not metastasized; or
- stage A (T1a or T1b) prostate cancer.

No benefit will be payable under the definition of "Cancer (Life-Threatening)" if, within the first 90 days following the later of the effective date of the policy or rider, as applicable, or the date of the last

reinstatement of the policy or rider, the Insured has any of the following:

- signs or symptoms or investigations that lead to a diagnosis of cancer (covered or excluded under the policy or rider), regardless of when the diagnosis is made;
- a diagnosis of cancer (covered or excluded under the policy or rider).

This medical information as described above must be reported to our head office within 6 months of the date of the diagnosis. If this information is not provided, we have the right to deny any claim for cancer or any critical illness caused by any cancer or its treatment.

Coma

A definite diagnosis of a state of unconsciousness with no reaction to external stimuli or response to internal needs for a continuous period of at least 96 hours and for which period the Glasgow coma score must be 4 or less. The diagnosis of coma must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Exclusions

No benefit will be payable under the definition of "Coma" for:

- a medically induced coma; or
- a coma which results directly from alcohol or drug use; or
- a diagnosis of brain death.

Coronary Artery Bypass Surgery

The undergoing of heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass graft(s). The surgery must be determined to be medically necessary by a specialist.

Survival period

The 30-day period following the date of surgery.

Exclusions

No benefit will be payable under the definition of "Coronary Artery Bypass Surgery" for angioplasty, intra-arterial procedures, percutaneous transcatheter procedures or non-surgical procedures.

Heart Attack

A definite diagnosis of the death of heart muscle due to obstruction of blood flow, that results in a rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:

- heart attack symptoms;
- new electrocardiogram (ECG) changes consistent with a heart attack;
- development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

The diagnosis of heart attack must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Exclusions

No benefit will be payable under the definition of "Heart Attack" for:

- elevated biochemical cardiac markers as a result of an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty, in the absence of new Q waves; or
- ECG changes suggesting a prior myocardial infarction, which do not meet the heart attack definition as described above.

Heart Valve Replacement or Repair

The undergoing of surgery to replace any heart valve with either a natural or mechanical valve or to repair heart valve defects or abnormalities. The surgery must be determined to be medically necessary by a specialist.

Survival period

The 30-day period following the date of surgery.

Exclusions

No benefit will be payable under the definition of “Heart Valve Replacement or Repair” for angioplasty, intra-arterial procedures, percutaneous trans-catheter procedures or non-surgical procedures.

Kidney Failure

A definite diagnosis of chronic irreversible failure of both kidneys to function, as a result of which regular haemodialysis, peritoneal dialysis or kidney transplant is required. The diagnosis of kidney failure must be made by a specialist.

Survival period

The 30-day period following the date the critical illness is diagnosed.

Major Organ Failure on Waiting List

A definite diagnosis of the irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow, and the transplant must be medically necessary. To qualify under Major Organ Failure on Waiting List, the Insured must become enrolled as the recipient in a recognized transplant centre in Canada or the United States that performs the required form of transplant surgery. The diagnosis of the major organ failure must be made by a specialist.

Survival period

The 30-day period following the date of the insured’s enrolment in the transplant centre specified above.

Major Organ Transplant

A definite diagnosis of the irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow, and transplantation must be medically necessary. To qualify under Major Organ Transplant, the Insured must undergo a transplant procedure as the recipient of a heart, lung, liver, kidney or bone marrow, and limited to these entities. The diagnosis of the major organ failure must be made by a specialist.

Survival period

The 30-day period following the date of the transplantation.

Paralysis Due to an Accident

A definite diagnosis of the total loss of muscle function of two or more limbs as a result of an accident, for a period of at least 90 days following the precipitating event. The diagnosis of paralysis must be made by a specialist.

Survival period

The survival period is satisfied once the above conditions have been met.

Exclusion

No benefit will be payable under the definition of "Paralysis Due to an Accident" if the paralysis is caused by an illness.

Severe Burns

A definite diagnosis of third-degree burns over at least 20% of the body surface. The diagnosis of severe burns must be made by a specialist.

Survival period

The 30-day period following the date the severe burns occurred.

Stroke (Cerebrovascular Accident)

A definite diagnosis of an acute cerebrovascular event caused by intracranial thrombosis or hemorrhage, or embolism from an extracranial source, with:

- acute onset of new neurological symptoms; and
- new objective neurological deficits on clinical examination,

persisting for more than 30 days following the date of diagnosis. These new symptoms and deficits must be corroborated by diagnostic imaging testing. The diagnosis of stroke must be made by a specialist.

Survival period

The survival period is satisfied once the above conditions have been met.

Exclusions

No benefit will be payable under the definition of "Stroke" for:

- transient ischaemic attacks; or,
- intracerebral vascular events due to trauma; or,
- lacunar infarcts which do not meet the definition of stroke as described above.

GENERAL PROVISIONS/STATUTORY CONDITIONS

The “General provisions” of the policy apply to this rider as if they were specified herein, except for the following provisions:

- Effective date of policy
- Beneficiary
- Incontestability
- Misstatement of age or sex
- False statement - smoking status
- Suicide

PREMIUM

The annual premium for this rider is indicated in the Policy Specifications. The premium is guaranteed for the term specified and is payable until the date indicated in the Policy Specifications, subject to the “Provisions governing automatic renewals” section of this rider. If this rider terminates, the annual premium payable under the contract will be reduced accordingly.

RIDER TERM

This rider is a renewable level term critical illness insurance issued for an initial term whose duration is indicated in the Policy Specifications.

EFFECTIVE DATE

This rider takes effect on the latest of the following dates:

- (a) the date the application is approved without amendment or restriction by us;
- (b) the date of issue when the application is approved without amendment or restriction by us;
- (c) the date the insured signs an amendment or restriction to the application at our request

provided that on that date:

- (a) the first premium has been paid during the lifetime of the insured; and
- (b) no change has occurred with respect to the insurability of the insured since the signing of the application; and
- (c) any information or answer provided in the application remains complete and true.

BENEFICIARY

Unless otherwise specified, the beneficiary of the critical illness insurance benefit is the insured. Subject to any legal restrictions, you may, during the insured’s lifetime, change the beneficiary by way of a written notice sent to our head office. The change will take effect on the date the notice is signed, whether the insured is living or not on the date such notice is received. However, the change will not have any effect on any measures taken by us before receiving such notice. We assume no liability with respect to the validity of the change of beneficiary.

Consent from the irrevocable beneficiary is required when you submit a request for a change of beneficiary or when you dispose of your rights under the contract.

INCONTESTABILITY

Except in the case of fraud or in the case of false or inaccurate statement with regard to the use of tobacco, nicotine, marijuana mixed with nicotine, or e-cigarettes, or in the case of misstatement of the age or sex of the insured, we will not contest this rider for reason of false or inaccurate statement or for failure to inform us of all material facts in connection with the insurance after this rider has been in force during the insured's lifetime for a period of two years from the later of the following dates:

- (i) The date of issue.
- (ii) The last date of reinstatement.

Any false or inaccurate statement or failure to inform us of all material facts in connection with the insurance may render this rider voidable at our option within two years from the later of the above dates. Fraud will automatically render this rider void and no premiums will be reimbursed. No benefit will be payable in either case.

MISSTATEMENT OF AGE OR SEX

If the age or sex of the insured has been misstated, the benefit payable will be adjusted by us to the amount that would have been payable had the insured's age or sex been correctly stated at rider issue. If on the date of issue the age of the insured was outside the applicable age limits, this rider will be deemed void, subject to any legal restrictions. In the event of fraud, no premiums will be reimbursed.

FALSE STATEMENT - SMOKING STATUS

If, with respect to the insured, the statements provided in an application with regard to the use of tobacco, nicotine, marijuana mixed with nicotine, or e-cigarettes erroneous, this rider terminates and no benefit is payable. Our liability will be limited to the reimbursement of premiums paid for this rider during the twelve months preceding its termination. In the event of fraud, no premiums will be reimbursed.

PROVISIONS GOVERNING THE CRITICAL ILLNESS INSURANCE BENEFIT

BENEFIT

When the insured is diagnosed with a covered critical illness as defined in this rider and he or she survives beyond the survival period for the diagnosed critical illness, we will pay this rider's sum insured to the beneficiary. The critical illness insurance benefit is payable subject to the conditions set out below in the "Entitlement to benefit" section and the limitations and exclusions specified in this rider.

Any amount due on the payment date of the critical illness insurance benefit will be deducted from that benefit.

ENTITLEMENT TO BENEFIT

In order for the critical illness insurance benefit of this rider to be paid, the claimant must provide us, at his or her expense, with the following proofs:

- (a) Proof satisfactory to us that the insured was diagnosed, by a specialist, with a covered critical illness as defined in this rider.
- (b) Proof satisfactory to us that the covered critical illness was diagnosed while this rider was in force.
- (c) Proof satisfactory to us that the insured has survived beyond the survival period for the diagnosed covered critical illness.

- (d) Proof satisfactory to us of the age of the insured.
- (e) Proof satisfactory to us of the claimant's right to this rider's critical illness insurance benefit.

If the insured is in the survival period established for the covered critical illness on the expiration date of this rider and he or she survives beyond that survival period, we will pay the critical illness insurance benefit subject to the conditions listed above and the limitations and exclusions specified in this rider.

LIMITATIONS

No benefit is payable if the insured experiences an irreversible cessation of all functions of the brain during the survival period, regardless of the cause.

EXCLUSIONS

In addition to the exclusions specified in the "Covered Critical Illnesses" section of this rider, no critical illness insurance benefit is payable if the covered critical illness results directly or indirectly from one of the following, whether or not the insured is of sound mind at the time:

- (a) An attempted suicide or a self-inflicted injury.
- (b) The commission or attempted commission of a criminal act by the insured, whether or not charges are laid.
- (c) The operation of any motor vehicle by the insured while his or her blood alcohol level exceeds 80 milligrams per 100 millilitres of blood (0.08) or any other lower limit prescribed by law.
- (d) The use by the insured of any medication, drug or opiate other than prescribed by a physician.
- (e) The use by the insured of an illegal drug.
- (f) A public demonstration, riot, insurrection, war or military operation, whether war has been declared or not.
- (g) The flight or attempted flight in any aircraft, as crew member, passenger or otherwise, except where the insured is travelling as a regular paying passenger in an aircraft authorized to carry passengers under regulations governing air navigation.
- (h) The participation by the insured in mountaineering, rock climbing, parachuting, hang gliding, automobile or motorcycle racing (or the racing of any other motorized vehicle) or horse racing.

No critical illness insurance benefit is payable if the insured dies before the end of the survival period for the diagnosed critical illness.

No critical illness insurance benefit is payable if the insured suffers from a covered critical illness that is diagnosed in a jurisdiction other than Canada or the United States, unless the claimant makes all requested medical records available to us and that we are satisfied that:

- (a) The same diagnosis would have been made if the covered critical illness had occurred in Canada or the United States;
- (b) The physician making the diagnosis was licensed to practice in the jurisdiction in which the diagnosis was made and had medical credentials equal to those required in Canada or the United States;
- (c) The diagnosis is fully supported by all appropriate diagnostic tests and other investigation which would normally be undertaken in Canada or the United States (including those required under the contract); and

- (d) Where applicable, the same type of surgery or treatment as required under the contract in order for the benefit to be payable would have been advised if the diagnosis had been made in Canada or the United States.

Exclusion for pre-existing condition

No critical illness insurance benefit is payable if the insured suffers from a covered critical illness at any time during the 12-month period following the later of:

- i) The effective date of this rider; or
- ii) The date of its most recent reinstatement, if applicable;

and the diagnosed critical illness results directly or indirectly from an illness or condition for which, during the 12-month period prior to the later of the two dates above, the insured:

- a) Showed signs or symptoms, or underwent tests or investigations; or
- b) Received a diagnosis or has been treated, hospitalized or under the care of a physician; or
- c) Was recommended to seek treatment or to consult a physician; or
- d) Was prescribed or took medication.

EXAMINATION, MEDICAL INFORMATION AND AUTOPSY

We reserve the right to require, at our expense, that the insured undergo additional tests or an independent medical examination by a physician of our choice. We can also ask for additional medical information from any physician or establishment having treated the insured. If the insured dies before the claim assessment is completed, we can request an autopsy on the body of the deceased insured, subject to the limitations of the law. In the event of refusal or failure to provide the proof requested, we will not be bound to pay any amount claimed.

NOTICE AND CLAIMS

A notice of critical illness must be submitted in writing and received at our head office within 30 days following the diagnosis of the covered critical illness. The claim, including the proofs specified in the "Entitlement to benefit" section of this rider, must be submitted and received at our head office within 60 days following the end of the survival period for the critical illness in question. For additional information regarding our claim procedures or to request the relevant forms, you may contact us by telephone at 506-853-6040 or 1-800-455-7337. You may also contact us by mail at the following address: Assumption Life, 770 Main Street / P.O. Box 160, Moncton NB E1C 8L1, by fax at 506-853-5459 or by e-mail at: claims@assumption.ca.

Failure to submit to us the notice, the claim for benefits or the required proof within the time prescribed does not invalidate the entitlement to the critical illness insurance benefit if the claimant can show that it was impossible for him or her to act within the specified period, and provided that the notice, the claim for benefits and required proof are submitted to us within the twelve (12) months following the diagnosis of the covered critical illness.

APPEAL

Anyone disagreeing with a refusal to pay a claim may ask for a review within 30 days from the date of the decision by sending us a written request for review and attaching any new supporting document.

A review will be undertaken and we will advise this person of our decision within 60 days of receiving the written request accompanied by any new supporting document.

LIMITATION OF ACTIONS

An action or proceeding against us for the recovery of a claim under the policy shall not be initiated more than one year after the date the benefit became payable or would have become payable if a valid claim had been presented.

For a policy issued in the Province of British Columbia and Alberta, every action or proceeding for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act.

For a policy issued in the province of Ontario, every action or proceeding against an insurer for the recovery of insurance money payable under the contract is prescribed by the time frame set out in the Limitations Act, 2002.

PROVISIONS GOVERNING AUTOMATIC RENEWALS

This rider is issued for the duration of the initial term indicated in the Policy Specifications. This rider may be renewed for additional periods of the same duration as the initial term. However, the expiry date of this rider may not exceed the rider anniversary nearest the insured's 75th birthday, regardless of the date of the latest renewal.

Renewals are automatic provided the contract is in force and the first premium for the new additional period is paid within 31 days following the end of the previous term.

The renewal premium rates per \$1,000 illustrated on page 12 are for a standard risk and are guaranteed. Upon renewal, the premium rate with respect to this rider is based on the attained age of the insured in accordance with the term selected and premium class. If the insured is subject to an extra premium upon renewal, an equivalent premium increase applies to this rider.

Any applicable rider fees must be added to the premium calculated.

RENEWAL PREMIUM RATES PER \$1,000
CRITICAL ILLNESS RIDER
Sum Insured: \$10,000 to \$50,000

TERM	15 years				20 years				25 years			
	Non-smoker		Smoker		Non-smoker		Smoker		Non-smoker		Smoker	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
33	4.04	4.46	4.79	5.96	--	--	--	--	--	--	--	--
34	4.29	4.65	5.12	6.26	--	--	--	--	--	--	--	--
35	4.54	4.84	5.45	6.55	--	--	--	--	--	--	--	--
36	4.93	5.10	6.05	7.12	--	--	--	--	--	--	--	--
37	5.32	5.36	6.66	7.68	--	--	--	--	--	--	--	--
38	5.72	5.63	7.26	8.25	6.23	6.21	9.07	9.33	--	--	--	--
39	6.11	5.89	7.87	8.81	6.69	6.54	9.89	10.07	--	--	--	--
40	6.50	6.15	8.47	9.38	7.15	6.88	10.70	10.81	--	--	--	--
41	7.02	6.53	9.67	10.19	7.99	7.43	12.45	12.13	--	--	--	--
42	7.54	6.92	10.87	11.00	8.83	7.98	14.20	13.44	--	--	--	--
43	8.05	7.30	12.06	11.81	9.68	8.52	15.96	14.76	11.90	9.67	19.34	17.15
44	8.57	7.69	13.26	12.62	10.52	9.07	17.71	16.07	12.87	10.19	20.91	18.26
45	9.09	8.07	14.46	13.43	11.36	9.62	19.46	17.39	13.83	10.72	22.49	19.37
46	10.39	8.80	17.30	15.49	12.77	10.34	21.68	19.06	15.34	11.60	25.84	21.54
47	11.69	9.54	20.14	17.55	14.18	11.06	23.90	20.72	16.85	12.48	29.19	23.70
48	12.99	10.27	22.97	19.61	15.60	11.79	26.13	22.39	18.36	13.36	32.55	25.87
49	14.29	11.01	25.81	21.67	17.01	12.51	28.35	24.05	19.87	14.24	35.90	28.03
50	15.59	11.74	28.65	23.73	18.42	13.23	30.57	25.72	21.38	15.12	39.25	30.20
51	17.20	12.49	32.30	25.88	20.52	14.32	35.92	28.61	22.88	15.84	42.87	32.19
52	18.81	13.24	35.95	28.02	22.61	15.42	41.28	31.50	24.39	16.55	46.49	34.19
53	20.42	13.99	39.61	30.17	24.71	16.51	46.63	34.39	25.89	17.27	50.10	36.18
54	22.03	14.74	43.26	32.31	26.80	17.61	51.99	37.28	27.40	17.98	53.72	38.18
55	23.64	15.49	46.91	34.46	28.90	18.70	57.34	40.17	28.90	18.70	57.34	40.17
56	26.80	17.03	53.37	37.42	31.01	19.60	61.71	41.99	31.01	19.60	61.71	41.99
57	29.96	18.58	59.83	40.38	33.12	20.50	66.08	43.81	33.12	20.50	66.08	43.81
58	33.13	20.12	66.28	43.34	35.23	21.41	70.46	45.62	35.23	21.41	70.46	45.62
59	36.29	21.67	72.74	46.30	37.34	22.31	74.83	47.44	37.34	22.31	74.83	47.44
60	39.45	23.21	79.20	49.26	39.45	23.21	79.20	49.26	39.45	23.21	79.20	49.26
61	42.94	24.81	83.86	51.09	42.94	24.81	83.86	51.09	42.94	24.81	83.86	51.09
62	46.42	26.41	88.52	52.91	46.42	26.41	88.52	52.91	46.42	26.41	88.52	52.91
63	49.91	28.02	93.17	54.74	49.91	28.02	93.17	54.74	49.91	28.02	93.17	54.74
64	53.39	29.62	97.83	56.56	53.39	29.62	97.83	56.56	53.39	29.62	97.83	56.56
65	56.88	31.22	102.49	58.39	56.88	31.22	102.49	58.39	56.88	31.22	102.49	58.39
66	60.55	33.98	124.64	61.18	60.55	33.98	124.64	61.18	60.55	33.98	124.64	61.18
67	64.22	36.73	146.79	63.98	64.22	36.73	146.79	63.98	64.22	36.73	146.79	63.98
68	67.89	39.49	168.93	66.77	67.89	39.49	168.93	66.77	67.89	39.49	168.93	66.77
69	71.56	42.24	191.08	69.57	71.56	42.24	191.08	69.57	71.56	42.24	191.08	69.57
70	75.23	45.00	213.23	72.36	75.23	45.00	213.23	72.36	75.23	45.00	213.23	72.36
71	78.99	47.25	223.89	75.98	78.99	47.25	223.89	75.98	78.99	47.25	223.89	75.98
72	82.94	49.61	235.08	79.78	82.94	49.61	235.08	79.78	82.94	49.61	235.08	79.78
73	87.09	52.09	246.83	83.77	87.09	52.09	246.83	83.77	87.09	52.09	246.83	83.77
74	91.44	54.69	259.17	87.96	91.44	54.69	259.17	87.96	91.44	54.69	259.17	87.96

RIDER TERMINATION

This rider terminates under the same terms specified in the policy to which it is attached. This rider also terminates on the earliest of the following dates:

- (a) The death of the insured.
- (b) The date a critical illness insurance benefit is paid under this rider.
- (c) The date we receive your written notice requesting termination of this rider or the date of termination requested in your notice, should this date be later.
- (d) The date the policy or life insurance rider to which this rider is attached terminates, for whatever reason.
- (e) The date the policy or life insurance rider to which this rider is attached is continued as reduced paid-up insurance.
- (f) The rider anniversary nearest the insured's 75th birthday, regardless of the last renewal date.
- (g) The expiry date of this rider as indicated in the Policy Specifications, subject to the "Provisions governing automatic renewals" section of this rider.

SAMPLE