

ELECTION OF OPTIONAL DEBT CANCELLATION – DEBT CANCELLATION ADDENDUM (Called “Addendum” herein)

By and between the **BORROWER(s)** displayed in the Addendum Schedule below (Called “You,” “Your,” or “Yourself”) and

TELCOE FEDERAL CREDIT UNION (Called “We,” “Us,” or “Our”) **820 LOUISIANA STREET, LITTLE ROCK, AR 72201**

LOAN ACCOUNT NUMBER: _____

ADDENDUM SCHEDULE (called “Schedule” herein)

PRIMARY BORROWER AND ADDRESS		AGE	DATE OF BIRTH	CO-BORROWER AND ADDRESS		AGE	DATE OF BIRTH
PROTECTED LOAN NUMBER _____		<input checked="" type="checkbox"/> OPEN-END LOAN <input type="checkbox"/> CLOSED-END LOAN		Principal Amount of Loan \$ <u>\$1,000.00</u>			
Loan Effective Date	1 st Payment Due Date	Loan Maturity Date (Closed-End Loans)		Interest Rate	Scheduled Loan Payment	Number of Payments per Year	
				13.750%	\$	12m 24sm 52w	
ADDENDUM INFORMATION AND MAXIMUM BENEFIT LIMITS PER PROTECTED LOAN							
MAXIMUM PROTECTED BALANCE PER LOAN		MAXIMUM ADDENDUM TERM		MAXIMUM AGE ON ADDENDUM EFFECTIVE DATE		DEBT CANCELLATION PROTECTION STOPS WHEN EITHER BORROWER REACHES HIS OR HER TERMINATION AGE	
\$75,000		120 MONTHS		69 Years		70 th Birthday	
MAXIMUM PROTECTED MONTHLY PAYMENT		\$1,000					
MAXIMUM TOTAL NUMBER OF PROTECTED MONTHLY BENEFITS CANCELED:							
For Full Period (FP) Disability: 120 Months For Critical Period (CP) IU: 3 months per occurrence / 6 months per loan							
MAXIMUM TOTAL AMOUNT OF PROTECTED MONTHLY BENEFITS CANCELED:				Full Period Disability: \$75,000 per loan		CP IU: \$3,000 per occurrence \$6,000 per loan	
QUALIFYING EMPLOYMENT PERIOD FOR CRITICAL PERIOD (CP) INVOLUNTARY UNEMPLOYMENT (IU):							
YOU MUST BE EMPLOYED FOR AT LEAST SIX (6) MONTHS BEFORE ADDENDUM EFFECTIVE DATE AND EACH ADVANCE DATE.							
ADDENDUM EFFECTIVE DATE	ADDENDUM EXPIRATION DATE (Closed-End Loans) (or 70 th Birthday, whichever comes first)	IU VESTING PERIOD 6 Months after Effective Date of an Advance	WAITING PERIOD Disability is 30 Days IU is 30 Days				
			PROTECTED MONTHLY BENEFIT ACTIVATION BEGINS ON the thirty-first (31 st) day of a Protected Event for Disability or the thirty-first (31 st) day of a Protected Event for IU				
If Paid According to Plan.		04/25/2022					
PROTECTED EVENT OPTIONS						Debt Cancellation Fee (“DC Fee”)	
“SINGLE” MEANS ONLY ONE BORROWER IS PROTECTED. “JOINT” MEANS BOTH THE PRIMARY BORROWER AND THE CO-BORROWER ARE PROTECTED. “FP” MEANS FULL PERIOD PROTECTION. “CP” MEANS CRITICAL PERIOD PROTECTION.						Monthly DC Fee per \$1,000 of Outstanding Balance	Estimated Total DC Fee (Closed-End Loans)
<input type="checkbox"/> #1 – Full Period All Cause Death	<input type="checkbox"/> Single All Cause FP Death					\$ 0.49	\$
	<input type="checkbox"/> Joint All Cause FP Death					\$ 0.82	\$
<input type="checkbox"/> #2 – Full Period All Cause Disability	<input type="checkbox"/> Single All Cause FP Disability					\$ 1.39	\$
	<input type="checkbox"/> Joint All Cause FP Disability					\$ 2.58	\$
<input type="checkbox"/> #3 – Full Period All Cause Death & Full Period All Cause Disability	<input type="checkbox"/> Single All Cause FP Death + Single All Cause FP Disability					\$ 1.88	\$
	<input type="checkbox"/> Joint All Cause FP Death + Single All Cause FP Disability					\$ 2.21	\$
	<input type="checkbox"/> Joint All Cause FP Death + Joint All Cause FP Disability					\$ 3.40	\$
<input checked="" type="checkbox"/> #4 – Full Period All Cause Death, Full Period All Cause Disability, & Critical Period IU	<input checked="" type="checkbox"/> Single All Cause FP Death + Single FP Disability + Single CP IU (3/6)					\$ 2.90	\$ 19.18
	<input type="checkbox"/> Joint All Cause FP Death + Single FP Disability + Single CP IU (3/6)					\$ 3.23	\$
FOR OPTIONS #2, #3, and #4 FULL PERIOD ALL CAUSE DISABILITY PROTECTION WILL BE “ACCIDENTAL DISABILITY” PROTECTION BETWEEN AGES 66 THROUGH 70							
IF YOU ELECT A PROTECTED EVENT OPTION WITH SINGLE PROTECTION (SINGLE ALL CAUSE FP DEATH, SINGLE ALL CAUSE FP DISABILITY, SINGLE ALL CAUSE CP DISABILITY, OR SINGLE CP IU), THE BORROWER TO BE COVERED IS LISTED BELOW.							
PROTECTED BORROWER: _____							

THIS ADDENDUM AMENDS YOUR LOAN AGREEMENT (“LOAN AGREEMENT” REFERS TO THE PROTECTED LOAN DESCRIBED IN THE SCHEDULE). IF YOU ARE ELIGIBLE, EITHER THE PRIMARY BORROWER OR THE CO-BORROWER MAY ELECT SINGLE DEBT CANCELLATION PROTECTION. IF YOU ARE ELIGIBLE FOR AND ELECT JOINT DEBT CANCELLATION, THE TERMS “YOU,” “YOUR,” AND “YOURSELF” IN THIS ADDENDUM REFER TO BOTH THE PRIMARY BORROWER AND CO-BORROWER. YOUR PURCHASE OF DEBT CANCELLATION IS OPTIONAL.

WHETHER OR NOT YOU PURCHASE DEBT CANCELLATION WILL NOT AFFECT YOUR APPLICATION FOR CREDIT OR THE TERMS OF ANY EXISTING LOAN AGREEMENT YOU HAVE WITH US.

DEBT CANCELLATION WILL NOT BE PROVIDED UNLESS YOU SIGN THIS ELECTION FORM AND AGREE TO PAY THE DEBT CANCELLATION FEE.

DEBT CANCELLATION MAY NOT BE ENOUGH TO CANCEL YOUR ENTIRE LOAN BALANCE OR REQUIRED MONTHLY LOAN PAYMENT. EACH PROTECTED EVENT WILL HAVE MAXIMUM LIMITATIONS ON THE AMOUNT, ELIGIBILITY AGE, AND/OR TERM OF DEBT CANCELLATION.

YOU ARE BOUND BY THE TERMS AND CONDITIONS IN THIS ADDENDUM, EVEN IF YOU DO NOT READ IT. SO PLEASE READ THIS ADDENDUM CAREFULLY

A FULL EXPLANATION OF THE TERMS AND CONDITIONS OF CANCELLATION(S) PROVIDED, AND A COMPLETE DESCRIPTION OF THE PROTECTED EVENT PACKAGE YOU SELECTED, AND ANY SPECIFIC ELIGIBILITY REQUIREMENTS, LIMITATIONS, OR EXCLUSIONS. FOR COMPLETE DETAILS OF THE TERMINATION OF THIS ADDENDUM, SEE THE TERMINATION OF ADDENDUM SECTION OF THE GENERAL PROVISIONS OF THIS ADDENDUM.

YOU HAVE THE RIGHT TO TERMINATE THIS ADDENDUM WITHIN SIXTY (60) DAYS OF THE EFFECTIVE DATE AND RECEIVE A FULL REFUND OF ANY FEE PAID.

APPLICATION FOR DEBT CANCELLATION

ACTIVELY-AT-WORK AND AGE STATEMENT – APPLICABLE FOR DISABILITY

I/We certify that: (a) I/We am/are Actively-at-Work for wage or profit for at least thirty (30) hours per week and that You have been so gainfully employed for a period of not less than two (2) weeks prior to the Effective Date, and the date of birth and age as stated in the Schedule are correct.

I/We am/are acknowledging that the above is true to the best of My/Our knowledge and belief. I/We agree that **TELCOE FEDERAL CREDIT UNION** is relying upon the truthfulness of these statements as the basis for issuing this Addendum, and I/We agree that if I/We have made a material misrepresentation, I/We may not be eligible to receive Debt Cancellation Benefit Activation.

By signing below, I/We acknowledge that I/We have read, understand, and accept all of the terms and provisions printed in this Addendum, and that no verbal representations have been made that differ from these terms and provisions. In return for this Addendum, I/We agree to pay the DC Fee for so long as I/We elect to maintain this Addendum. **I/We acknowledge receipt of a completely filled-in copy of this Addendum.**

PRIMARY BORROWER

DATE

CO-BORROWER

DATE

NON-PROTECTED BORROWER DECLINATION

By signing below, I/We hereby acknowledge that this Addendum was fully explained to Me/Us, and I/We choose not to purchase this Addendum. I/We understand that I/We will remain responsible for payment of any outstanding balance under the terms of My/Our Loan Addendum.

PRIMARY BORROWER

DATE

CO-BORROWER

DATE

**SIGNATURES ARE ONLY REQUIRED BY THE BORROWER WHO ACCEPTS OR DECLINES
THE PROTECTED EVENT OPTIONS AS STATED IN THE SCHEDULE.**

DEBT CANCELLATION ADDENDUM (referred to as "Addendum" herein)

This Addendum is part of Your Loan Agreement with Us, amends Your Loan Agreement with Us, and is entered into in consideration of the payment of the required DC Fees and in Our reliance upon the statements You made in Your Application for Debt Cancellation. This is an optional Addendum to Your Loan Agreement. This Addendum contains the terms, conditions, limitations, and exclusions upon which We will cancel all or a portion of Your Scheduled monthly Loan payment or all or a portion of the outstanding balance of Your loan. This Addendum applies to Your Loan only if You are a participant in Our Debt Cancellation program. This Addendum applies only to loan proceeds, Advances, and extensions of credit You have actually received prior to the date You incur a Protected Event. You are not protected for any unused credit, which may be available to You.

You should read this Addendum carefully and keep it in Your records. It explains the terms that both You and We agree to follow for the Cancellation. It replaces any and all Debt Cancellation Addendums previously issued with respect to the Protected Loan with Us shown in the Schedule.

DEFINITIONS

ACCIDENT means an unforeseen and unplanned event or circumstance.

ACTIVELY AT WORK. For Disability protection, Actively-at-Work means that on the effective date of Your Loan and on the effective date of any Advance, You are actively working for wages or profit for at least thirty (30) hours per week, and that You have been gainfully employed for a period of not less than two (2) weeks. For Involuntary Unemployment protection, Actively-at-Work means that on the effective date of Your Loan and on the effective date of any Advance, You are actively working for wages or profit for thirty (30) hours or more per week, and that You have been so gainfully employed for a period of not less than six (6) months. You shall be deemed to be Actively-at-Work if absent due solely to regular day off, holiday, or regularly paid vacation.

ACTIVELY SEEKING EMPLOYMENT. For Involuntary Unemployment protection, "Actively Seeking Employment" means that You have registered for employment with Your state unemployment office or recognized employment agency starting no later than thirty (30) days after You become involuntarily unemployed. However, You are not required to be Actively Seeking Employment if Your Involuntary Unemployment is a result of a general strike, unionized labor dispute, or lockout.

ADMINISTRATOR means **AMERICAN NATIONAL ADMINISTRATORS, INC., P. O. BOX 9007, LEAGUE CITY, TX 77574-9007, Office: 800-899-6502, FAX: 409-535-7447, E-mail Address: cli@anico.com**

ADVANCE means loan proceeds that are paid to You under a Closed-End or Open-End loan or each extension of credit We provide to You in connection with an Open-End, credit card, or revolving line of credit loan. An Advance will be treated as a new loan and will be subject to all the terms, provisions, limitations, and benefit exclusions of this Addendum. If Your death or Disability is the result of a Pre-Existing condition, Advances made within the six (6) months prior to the Date of Loss will not be eligible for Debt Cancellation.

ALL CAUSE means that the cause of the Protected Event was the result of an Accident or an Injury or a Sickness unless otherwise specified.

BENEFIT ACTIVATION means the process whereby after We have received a written request for Debt Cancellation, a completed Benefit Activation form, and proof that You have incurred a Protected Event, We cancel Your Protected Balance or a Protected Monthly Benefit.

BORROWER (referred to as "You" or "Your" herein) means a person whose name appears in the Schedule as the Protected Borrower or Co-Borrower and who has signed the loan documents and is personally obligated to repay the Protected Loan shown in the Schedule.

PRIMARY BORROWER means the person whose name appears first (1st) on the Protected Loan documents.

CO-BORROWER means the person whose name appears second (2nd) on the Protected Loan documents.

CLOSED-END LOAN means any extension of credit We provide to You that is subject to a finance charge, and that pursuant to the provisions of the Loan agreement, the total principal, payments, and term for repayment, and the Loan maturity date is specified.

CRITICAL PERIOD (referred to as "Critical Period" or "CP" herein) means the Debt Cancellation Benefit will be a limited number of Protected Monthly Benefits shown in the Schedule.

DATE OF LOSS means the date on which You incur a Protected Event. Any Waiting Period shown in the Schedule is measured from the Date of Loss.

DEBT CANCELLATION means Our agreement with You that if We through our Administrator receive proof that You have incurred a Protected Event subject to the conditions, provisions, limitations, and exclusions of this Addendum, We will cancel all or a portion of the unpaid balance of Your Protected Loan or Your monthly Loan payment in accordance with the terms and provisions of this Addendum.

EFFECTIVE DATE OF DEBT CANCELLATION PROTECTION (referred to as "DC Effective Date" herein) shall be the later of the Addendum Effective Date shown in the Schedule or the date the proceeds of an Eligible Loan or an Advance are paid to You or credited to Your Loan account. The DC Effective Date shall apply anew and separately to the date of each Advance. If You pay off the balance of a Protected Open-End loan, revolving credit loan, or credit card account, the DC Effective Date for any subsequent Advances will begin when You next activate Your Loan account or receive an Advance.

FULL PERIOD means the Debt Protection associated with the named Protected Event remains in-force until this Addendum is terminated or expires.

INDEPENDENT CONTRACTOR means Your employment is based on a contract or agreement that has a fixed duration and that is for less than one (1) year.

INJURY means accidental bodily injury, which requires the regular care of a Physician.

JOINT PROTECTION means that in the Schedule and in Your application for optional Debt Cancellation, You elected Debt Cancellation protection for both the Primary Borrower and Co-Borrower.

LOAN AGREEMENT means the promissory note, financial agreement, and other loan documents You executed in connection with the Protected Loan.

MATERIAL MISREPRESENTATION means a statement You made or answer You provided in Your application or enrollment for this Addendum that is a significant fabrication, distortion, or intentional concealment of fact, and that if the truth had been disclosed, You would not have been eligible for Debt Cancellation, or We would not have issued this Addendum, or We would have issued it differently. If We discover that You made a Material Misrepresentation in Your application or enrollment for Debt Cancellation, We reserve the right to not approve any request You or Your estate make(s) for Benefit Activation. If this Addendum was issued based on false or misleading information provided by You in Your application for Debt Cancellation or other written statement, We have the right to cancel this Addendum, including any Activated Benefit (Debt Cancellation), and return any DC Fee paid to You. Provided, however, if Debt Cancellation has been activated, we reserve the right to cancel this Addendum, and the DC Fee will be deemed earned.

NON-PROTECTED ADVANCE means any Advance We provide to You: **1)** made prior to the Addendum Effective Date; or **2)** made during a period when You are eligible for and receiving Debt Cancellation due to Benefit Activation for a Protected Event; or **3)** made during any Waiting Period; or **4)** made after this Addendum is terminated; or **5)** made after the Protected Loan is in default or is subject to being charged off; or **6)** not made according to the terms of the Loan Agreement; or **7)** made during a Past Event; or **8)** made after the Addendum Expiration Date shown in the Schedule; or **9)** made after You reach the applicable benefit Termination Date shown in the Schedule; or **10)** for Involuntary Unemployment, made to You after the Date of Loss but before You have satisfied the Vesting Period; or **11)** made to You when You are ineligible or do not qualify for Debt Cancellation according to the terms of this Addendum.

OPEN-END LOAN means any Loan, debt, Advance, or extension of credit We provide to You under an Open-End Loan agreement, credit card, or revolving

line of credit that are subject to a finance charge and where repeated Advances are contemplated.

PAST EVENTS means an event that occurred before the DC Effective Date. Past Events are not eligible for Debt Cancellation.

PHYSICIAN means a doctor of medicine or an osteopath who is duly licensed by the state medical board and provides medical services within the scope of his or her license. Such doctor or osteopath must not be a person who is a co-maker or guarantor of the Protected Loan nor a member of a Protected Borrower's immediate family. Practitioners of homeopathic or naturopathic medicine are not considered eligible physicians.

PRE-EXISTING CONDITION means an Injury or Sickness for which You received or a prudent person would have sought medical consultation, diagnosis, or treatment (including prescription medication) from a licensed Physician within six (6) months immediately preceding the Addendum Effective Date or the date of any Advance, which results in or substantially contributes to Your Death or Disability within six (6) months following the DC Effective Date or the date of any Advance. Pre-existing conditions will apply to each Advance.

PROTECTED BALANCE means the eligible outstanding balance of Your Protected Loan as of the Date of Loss plus up to three (3) months accrued and unpaid interest, excluding any late fees and prepayment penalties. However, the amount of debt canceled is limited to the Maximum Protected Balance shown in the Schedule.

PROTECTED EVENT means Your Death, Total Disability, or Involuntary Unemployment, which occurs on or after the DC Effective Date and prior to the earliest of the following: a) the Addendum Expiration Date displayed in the Schedule; or b) the Scheduled maturity date of the Protected Loan; or c) the date You attain the Termination Age displayed in the Schedule.

PROTECTED LOAN referred to as "Loan" or "Protected Loan" in this Addendum means the loan shown in the Schedule.

PROTECTED MONTHLY BENEFIT means the lesser of: **1)** the Scheduled Monthly Loan Payment of Your Protected Loan, which includes principal, interest, and the DC Fee due on the Protected Balance; or **2)** the Maximum Protected Monthly Benefit shown in the Schedule. It does not include any other fees, late charges, or penalties. For variable interest rate loans, the Protected Monthly Benefit will be adjusted to reflect any contractual change in the interest rate. A canceled amount for any period of Disability or Involuntary Unemployment less than thirty (30) days will be calculated at a rate of 1/30th of the Protected Monthly Benefit for each day of such period.

QUALIFYING EMPLOYMENT PERIOD means the minimum amount of time You must have been continuously employed following the DC Effective Date or the effective date of any Advance prior to the Date of Loss to become eligible to receive Benefit Activation as a result of Involuntary Unemployment.

SEASONAL EMPLOYMENT means employment that is based on a contract or agreement that has a fixed duration and that is for less than one (1) year.

SICKNESS means an illness, infection, or disease diagnosed by a Physician that requires the regular care of a Physician.

VESTING PERIOD is applicable to the Involuntary Unemployment Protected Event and means the amount of time that You must be continuously Actively at Work after the DC Effective Date or the effective date of any Advance during which You are not eligible for Debt Cancellation or Benefit Activation.

WAITING PERIOD means: **1)** for Disability protection, the consecutive number of days You must be totally disabled to become eligible for Benefit Activation; and **2)** for Involuntary Unemployment protection, the consecutive number of days after the Addendum Effective Date or the effective date of any Advance that You must be involuntarily unemployed to become eligible for Benefit Activation.

GENERAL PROVISIONS

ELIGIBLE DEBTS. To be eligible for inclusion in this Debt Cancellation program, Your Loan with us must be an Open-End or Closed-End loan or an extension of credit We have provided to You under a revolving line of credit or credit card for which You have an unconditional obligation to pay. If You have elected to purchase Disability or Involuntary Unemployment protection, only loans that are repayable in monthly payments are eligible for inclusion in this Debt Cancellation program.

PROTECTED BORROWER ELIGIBILITY. You are eligible to qualify for Debt Cancellation under this Addendum on the effective date of the Protected Loan, or on the DC Effective Date, or on the date You make an Advance if:

- 1) You are a natural person (not a partnership, corporation, or association);
- 2) Your attained age is less than the Termination Age shown in the Schedule for each of the Protected Events You have elected to purchase;
- 3) You have entered into a binding written debt agreement (the Protected Loan) with Us, and You are unconditionally obligated to repay the debt;
- 4) You have requested Debt Cancellation and agree to pay the DC Fee for the Protected Events You have selected as shown in the Schedule;
- 5) for Disability, You are Actively at Work;
- 6) for Critical Period Involuntary Unemployment: a) You are Actively at Work; and b) You have been continuously Actively at Work during the Qualifying Employment Period shown in the Schedule.

However, You are not eligible for Critical Period Involuntary Unemployment Debt Cancellation if during the Qualifying Employment Period shown in the Schedule, or on the Effective Date of this Addendum, or on the Effective Date of an Advance: **1)** You are unemployed, retired, self-employed, engaged in Seasonal Employment, or employed as an Independent Contractor; or **2)** You are a controlling stockholder of Your employer; or **3)** You had notice, either oral or written, of pending unemployment within ninety (90) days prior to the Effective Date of this Addendum or any subsequent Advance; or **4)** You are receiving or have applied for Disability benefits from any source. Either the Primary Borrower or the Co-Borrower is eligible for Single Debt Cancellation. Both the Primary Borrower and Co-Borrower are eligible for Joint Debt Cancellation. Guarantors are not eligible for Debt Cancellation.

QUALIFYING FOR DEBT CANCELLATION. To qualify for Debt Cancellation, You must have: **1)** completed and signed an application for Debt Cancellation; and **2)** met the evidence of eligibility requirements in the application; and **3)** met the Protected Borrower Eligibility requirements herein.

DEBT CANCELLATION FEE (referred to as the "Debt Cancellation Fee" or "DC Fee(s)" herein) means the amount You agree to pay Us for Debt Cancellation. If You fail to pay the DC Fee within sixty (60) days of its due date, We can cancel this Addendum.

DC FEE CALCULATION. The DC Fee is calculated and charged monthly by multiplying the DC Fee rate shown in the Schedule times the result of dividing the lesser of your outstanding Loan balance or the Maximum Protected Balance shown in the Schedule by 1,000. For Open-End loans, or if Debt Cancellation is added after the start of Your loan, the DC Fee will be added to Your outstanding balance as an Advance each month. This may cause an increase in Your minimum monthly Loan Payment and increase the time it takes to fully repay the loan. Interest will accrue on the Advance attributable to the DC Fee.

If You have a variable or adjustable rate Loan, the DC Fee and Your Scheduled Loan Payment are based upon the initial principal and interest as shown in Your Loan Agreement. For Closed-End loans, the DC Fee becomes part of Your required monthly Loan Payment, and the Total DC Fee shown in the Schedule is an estimate based on the initial Scheduled Loan Payment of principal and interest shown in Your Loan Agreement. No Fees will be charged and no benefits will be provided on any amount in excess of the Maximum Protected Balance shown in the Schedule.

CHANGE OF DC FEES. We may change the DC Fee rate at any time and for any reason by providing You with sixty (60) days' advance written notice. Any increase in the DC Fee rate will result in at least one (1) and maybe all of the following: **1)** an increase in the outstanding balance of Your Protected Loan; or **2)** an increase in the amount of Your periodic (monthly) Loan Payment; or **3)** an extension of the maturity date of Your Protected Loan.

TERMINATION AND CANCELLATION OF ADDENDUM. This Addendum and Your right to Debt Cancellation under this Addendum terminates, and any Advances will be considered Non-Protected Advances made on or after the date when the first of the following occurs: **1)** the Addendum Expiration Date shown in the Schedule; or **2)** the date You reach the Termination Age of seventy (70) as shown in the Schedule. If joint Protection is in force, the date You or Your Co-Borrower reach the Termination Age of seventy (70) as shown in the Schedule; or **3)** when any portion of any payment of the Loan is past due for ninety (90) days or more. If You bring Your Loan current, Your Protection under the program will not be reinstated automatically. You must re-enroll to participate in the program; or **4)** You fail to pay the DC Fee; or **5)** the date Your Loan is considered in default or is subject to charge off; or **6)** the date Your Loan collateral has been repossessed; or **7)** the date Your Loan is discharged, renewed, paid off, or refinanced, including discharge by cancellation of a Protected Balance or cancellation of Protected Monthly Benefits; or **8)** the date Your Loan is transferred to another (non-affiliated) creditor and is no longer serviced by Us; or **9)** sixty (60) days after We notify You that Debt Cancellation is being terminated; or **10)** the date any Protected Borrower commits a fraudulent action relative to this Addendum; or **11)** the date We receive Your written request to terminate Debt Cancellation or this Addendum; or **12)** the Scheduled maturity date of Your Loan or the date We terminate Your Open-End Loan; or **13)** the date the obligation to repay Your Loan has been transferred to another person or entity.

At any time and for any reason, You may cancel this Addendum by sending the Administrator written notification thirty (30) days in advance of the effective date of cancellation. If You request cancellation within sixty (60) days of the Addendum Effective Date shown in the Schedule, We will refund or provide a credit of any DC Fee you have paid.

We may terminate this Addendum at any time and for any reason by providing You with sixty (60) days' advance written notice. Termination of this Addendum will not affect any pending request for Benefit Activation and Debt Cancellation related to a Protected Event incurred prior to the termination date.

BENEFIT ACTIVATION – FILING A CLAIM. To initiate Benefit Activation (request Debt Cancellation), You or the legal representative of Your estate must notify the Administrator when a Protected Event occurs and must send a written request for Benefit Activation to the Administrator within ninety (90) days after the Date of Loss of a Protected Event or as soon as thereafter is reasonably possible. The notice must give Your name(s), the loan number of Your Protected Loan, and must be sent to the Administrator.

Within fifteen (15) days of receipt of Your notification, We or the Administrator will send a Benefit Activation Request form. We will require written evidence to determine that conditions for a Protected Event are satisfied. We will not cancel any PROTECTED PAYMENT until We have received a properly completed Benefit Activation Request and proof of loss. Providing proof of Your Disability and/or Involuntary Unemployment and any expense related thereto is Your responsibility.

For Involuntary Unemployment: The Involuntary Unemployment Benefit Activation form must be completed by You, Your last employer, and other officials as may be required. If unemployment is the result of either Layoff or Termination by Your employer, You must provide satisfactory evidence that You have registered for work with a state employment office or a recognized employment agency within thirty (30) days after the last day employed. This evidence may include a statement signed by an official of the state employment office or recognized employment agency. You must remain registered during the period in which there is an active Protected Event, and You must be Actively Seeking Employment. If unemployment is the result of a Strike or Lockout, You must provide Us with satisfactory evidence, which may include a statement signed by an officer of the union. You must remain involuntarily unemployed and not receive compensation for work during the period of active Protected Event. We may require written proof of the continuing Involuntary Unemployment on a monthly basis.

To avoid additional interest, penalties, and late fees on Your Protected Loan, You must continue to make Your regularly Scheduled Loan Payment(s) until Your request for Benefit Activation has been approved and a Protected Balance or Protected Monthly Benefit is canceled. Except in the absence of legal incapacity, Your rights to Debt Cancellation will be forfeited if proof of loss is not furnished to the Administrator within twelve (12) months following the date a Protected Event occurred or began.

PHYSICAL EXAMINATION, CONTINUING PROOF OF DISABILITY OR INVOLUNTARY UNEMPLOYMENT, AND AUTOPSY. We reserve the right to require evidence of Your Disability from a Physician at reasonable intervals in order to verify proof of Your Disability and to require continuing proof of Your Involuntary Unemployment to justify continuing cancellation of Protected Monthly Benefits. If the Administrator does not receive the required proof of Disability or continuing proof of Your Involuntary Unemployment, Benefit Activation will stop, and We will cease canceling the Protected Monthly Benefit. In the event of Your Death, We reserve the right to request an autopsy if it is not forbidden by law.

CONCURRENT PROTECTED EVENTS. If Joint Debt Cancellation protection is in effect and one (1) or both of the Protected Borrowers incur(s) a Protected Event either independently or simultaneously, We will cancel only one (1) Protected Balance or one (1) Protected Monthly Benefit.

AMOUNTS OF DEBT CANCELED – MAXIMUM BENEFIT LIMITS. The Debt Cancellation will be applied to Your Loan account to reduce or discharge Your Protected Loan. There are maximum amounts of debt that We will cancel under this Addendum. The maximum amounts of Debt Cancellation (benefit limits) for each Protected Event are stated in the Schedule. The Protected Balance and the Protected Monthly Benefit exclude any amount defined as a Non-Protected Advance. The maximum aggregate amount we will cancel in the event of Your Death and Full Term Disability is shown in the Schedule as the Maximum Protected Balance. In the event of Your Disability or Involuntary Unemployment, the maximum amount we will cancel for any one (1) month is shown in the Schedule as the Maximum Protected Monthly Benefit. If the amount of Your indebtedness or scheduled monthly loan payment exceeds Our maximum benefit limits, We will reduce the amount of debt canceled to the Maximum Benefit Limits, and You or Your estate are obligated to pay the difference, if any, between the amount We cancel and the amount You are required to pay under the terms of Your Loan Agreement. Advances taken within the six (6) months prior to the Date of Loss are not included in the debt canceled if Your death or total disability is a result of a Pre-Existing Condition. Any Advances You have received within six (6) months prior to the date Your Involuntary Unemployment began are not included in the unpaid loan balance for calculating the amount of Your Protected Monthly Benefit.

We will refund to you or credit to Your Loan account balance any DC Fees You paid for excess protection above the maximum limits, and none of the excess protection will have been in effect. We can make this adjustment at any time while this Addendum is in effect. However, after We receive a Benefit Activation request, We will not make an adjustment that will affect that request for Benefit Activation but will apply the adjustment to apply to any subsequent events. Whenever a Protected Event occurs and You become eligible for the cancellation of a Protected Monthly Benefit, benefits will be provided on a monthly basis regardless of Your Loan Payment frequency.

CANCELLATION OF THE WRONG AMOUNT. If We cancel more or less than We should have according to the terms of this Addendum, We will adjust Your Loan balance when the error is discovered.

ADVANCES AND LOAN PAYMENTS AFTER A DATE OF LOSS. During the time it takes to process Your Benefit Activation request, You remain responsible for making the Scheduled minimum payment due on Your Loan by the payment due date. If You continue to take Advances while We are canceling a Protected Monthly Benefit or canceling any Protected Balance, any increase in the outstanding balance of Your Protected Loan associated with Advances You made after a Protected Event occurred will not be canceled unless another Protected Event occurs after the date of such Advance or charge while You are participating in the Debt Cancellation program and have paid the DC Fee.

BENEFIT EXCLUSIONS.

For all Events: You are protected only for Advances You actually received prior the date of a Protected Event. You are not protected for any unused credit, which may be available to You. We will not pay any fines, penalties, attorney fees, or collection costs. Any Advances You receive after a Protected Event has begun or any interest that accrues on these Advances will not be included in the calculation of Your Protected Monthly Benefit nor in the Protected Balance canceled.

We will not cancel any debt:

- a. if You were ineligible for or did not qualify for Debt Cancellation; or
- b. if You misstated Your age and Debt Cancellation was provided that would not have otherwise have been provided, and We discover this before We cancel any debt; or
- c. if You made any Material Misrepresentations in Your Application for this Addendum, which would have disqualified You from purchasing this Debt Cancellation; or,
- d. for any event that:
 - 1) occurred or began after You or the Co-Borrower reached the applicable Termination Age shown in the Schedule; or
 - 2) is caused by or results from Your participation in a riot or the commission of an assault or a felony; or
 - 3) is caused by or results from an atomic explosion or any release of nuclear energy (except when related to medical treatment); or
 - 4) is/was the result of an intentionally self-inflicted Injury or Sickness; or
 - 5) is a Past Event; or
 - 6) is the caused by or results from the use of alcohol or other intoxicants; or
 - 7) is caused by or results from the use of any drug, sedative, or narcotic, unless prescribed by a treating Physician; or
 - 8) is caused by or results from flight in a non-scheduled aircraft; or
 - 9) In addition, We will not cancel any portion of the outstanding balance of the Protected Loan that is the result of a Non-Protected Advance.

For All Loss of Life/Death events: The Protected Balance will not be eligible for Benefit Activation and no Debt Cancellation will occur if the cause of Your Death is a result of, or arises out of, or was contributed to by:

- 1) Suicide within twelve (12) months of the Addendum Effective Date or within twelve (12) months of the effective date of any Advance; or
- 2) a Pre-Existing Condition (see DEFINITIONS Section of this Addendum).

For a Disability event: There will be no Benefit Activation nor will any Protected Monthly Benefits be canceled if Your Disability is related to or results from:

- 1) a normal pregnancy; or
- 2) an intentionally self-inflicted Injury or Sickness; or
- 3) an elective surgery; or
- 4) an elective abortion; or
- 5) a Pre-Existing Condition (see DEFINITIONS Section of this Addendum).

For an Involuntary Unemployment event: There will be no Benefit Activation nor will any Protected Monthly Benefits be canceled for Advances, loan proceeds, or extensions of credit made to You during the Vesting Period shown in the Schedule, or if You are not actively seeking employment, or if the cause of unemployment is a result of, arises out of, or is contributed by:

- 1) voluntary forfeiture of salary, wages, or employment income; or
- 2) voluntary resignation or retirement; or
- 3) Disability (as herein defined); or
- 4) pregnancy or childbirth; or
- 5) termination as a result of willful misconduct (a transgression of some established and definite rule of action, a forbidden act or omission, or an act or omission involving dishonesty, or a dereliction of duty, active or passive, which is willful in character and beyond simple negligence) or criminal misconduct (unlawful behavior as determined by local, state, or federal law); or
- 6) a material circumstance known by You prior to Your applying for Involuntary Unemployment Debt Cancellation; or
- 7) seasonal employment, business failure if self-employed, or a severance of employment relationship if an Independent Contractor; or
- 8) imprisonment; or
- 9) the Scheduled termination of Your employment pursuant to an employment contract.

If You are receiving severance pay, then You are not considered involuntarily unemployed for purposes of this Addendum until the severance period ends.

To be eligible for Critical Period Involuntary Unemployment Benefits, You must be Actively at Work on the date of each Advance and for the six (6) months prior to the Advance. If You are not, that particular Advance will not be protected until You return to being Actively at Work.

ERRORS AND ADJUSTMENTS. If We issued this Addendum in error, We will terminate the Addendum as of the date We discover the error. If We recognize the error before a Protected Event occurs, Our obligation to You is limited to return of any DC Fee You have paid. If We recognize the error after a Protected Event has occurred, You will be eligible for Debt Cancellation for the Protected Event that occurred, and the DC Fee You have paid will be deemed earned.

CHANGING THE TERMS OF THIS ADDENDUM. Only We have the right to change the terms (including the addition to or deletion of provisions and the amount of the DC Fees) of this Addendum and apply those changes to Your Protected Loan. We will notify You in writing sixty (60) days in advance of the effective date of any change that may affect Your rights or the DC Fee. Any changes will be made in accordance with the applicable law. **Your continued payment of the DC Fee will constitute Your acceptance of any changes.**

WAIVER OF ADDENDUM PROVISIONS. We reserve the right to waive any of the requirements described in this Addendum at Our sole discretion. Waiving a requirement does not obligate Us to waive the same requirements in any other instance. Our failure to enforce a provision does not constitute a waiver of any other requirements.

GOVERNED BY STATE STATUTES. This Addendum will be governed by the local law of the state having jurisdiction over the Protected Loan agreement.

LEGAL ACTION. No action at law or in equity shall be brought against Us in connection with any claim for Benefit Activation or Debt Cancellation neither earlier than sixty (60) days after a request for Benefit Activation has been sent to the Administrator nor later than three (3) years from the expiration of the time from which proof of such claim is required.

TAX IMPLICATIONS. You may be subject to federal, state, and local taxes on the amount of the canceled debt. You should consult Your tax advisor. Neither We nor Our Administrator are able to provide You with guidance on the tax implications, if any, of the canceled debt.

RESPONSIBILITY FOR PRIOR BALANCES, PAST DUE FEES, AND LATE CHARGES. You are responsible for making the Scheduled Loan Payments due on Your Loan. You are responsible for paying past due amounts as well as any late charges.

ASSIGNMENT. You may not assign Your rights or delegate Your obligations under this Addendum without Our prior written consent. Any attempted assignment or delegation without the required written consent shall be void.

PROTECTED EVENTS

PROTECTED EVENTS: While this Addendum is in effect, and subject to the terms, conditions, requirements, limitations, and exclusions contained in this Addendum, a Protected Event occurs when a Protected Borrower dies, becomes totally disabled, or becomes involuntarily unemployed.

LOSS OF LIFE / DEATH EVENTS

FULL PERIOD, ALL CAUSE DEATH – This section applies to all options except Option 2.

FULL PERIOD, ALL CAUSE DEATH means the death of a Protected Borrower as a result of an Accident, Injury, infection, or Sickness.

PROTECTED BALANCE CANCELLATION. Upon the Administrator's receipt of proof of Your Death, We will cancel the Protected Balance subject to the Maximum Protected Balance shown in the Schedule and the Maximum Amount of Debt Cancellation – Benefit Limits in the General Provisions of this Addendum. The cancellation will reduce or discharge the outstanding balance of Your Loan. The Administrator must receive a copy of the death certificate (or other lawful evidence) and a written request for Benefit Activation as proof of Your death. Only one (1) death benefit is provided under this Addendum.

If You elected single Debt Cancellation and Your Death does not meet the requirements for Benefit Activation, Our liability will be limited to termination of this Addendum and a pro rata refund of any unearned DC Fees paid. If You elected Joint Debt Cancellation and Your death does not meet the requirements for Benefit Activation, this Addendum will remain in force for the surviving Protected Borrower, and the DC Fee will be reduced to the amount then charged for single Loss of Life event.

If You elected Joint Loss of Life Debt Cancellation and one (1) or both of the Protected Borrowers die, either independently or simultaneously, We will cancel only one (1) Protected Balance as of the Date of Loss, and this Addendum will terminate, and all DC Fees will be considered earned unless the Protected Loan is an Open-End Loan and Joint Loss of Life Debt Cancellation is in effect. If Joint Loss of Life Debt Cancellation is in effect, single protection will continue on the surviving Protected Borrower, and the DC Fee will be reduced to the amount then charged for single Loss of Life protection.

TOTAL DISABILITY EVENTS

FULL PERIOD, ALL CAUSE TOTAL DISABILITY – This section applies to all Options, except Option #1 for all debtors age 65 years or younger.

TOTAL DISABILITY (referred to as "Disability" herein) means during the first twelve (12) months following the date you become totally disabled means that as a result of an Injury or Sickness, You are: **1)** receiving regular medical treatment for the cause of Your Disability; and **2)** not working at any job for pay or benefits; and **3)** unable to perform substantially the duties of the occupation in which You were engaged on the Date of Loss. Thereafter, the definition of Total Disability changes. You must still be under the regular care of a Physician and not working at any job for pay or benefits; however, the third qualification changes to: *"You are unable to perform substantial duties of any business or occupation for which You are reasonably suited by virtue of Your education, training, and experience."*

Your Total Disability: **1)** must begin while Your attained age is less than the Termination Age for Disability shown in the Schedule; and **2)** must be continuous for more than the number of days shown as the Waiting Period in the Schedule; and **3)** must be certified in writing by a Physician.

FULL PERIOD, ALL CAUSE DISABILITY means that You are totally disabled as a result of an Injury or Sickness.

BENEFIT ACTIVATION. During one (1) or more eligible periods of Disability, beginning on the day Protected Monthly Benefit Cancellation Begins in the Schedule, after you have been totally disabled and satisfied the Waiting Period shown in the Schedule and qualified for Benefit Activation, Your Benefit Activation will begin on the day shown under "Protected Monthly Benefit Cancellation Activation Begins On" in the Schedule, and We will cancel the Protected Monthly Benefit.

The amount of the Protected Monthly Benefit will be the lesser of Your Scheduled Monthly Loan Payment under the terms of Your Loan Agreement or the Maximum Protected Monthly Benefit for Disability shown in the Schedule. Benefits will be provided on a monthly basis regardless of Your scheduled Loan Payment frequency.

CONTINUING CERTIFICATION OF DISABILITY. You must provide written certification of Your Disability to the Administrator to verify and initially confirm that You are under the regular care and treatment of a Physician and to justify the initiation of Benefit Activation. After initial Benefit Activation You must continue to provide written certification of Your Disability to the Administrator monthly or at such reasonable intervals as We determine to justify the continuation of Benefit Activation. The written certification must show the date Your Disability began, the date(s) of treatment, the diagnosis, status of medical treatment, the name, address, and telephone number of Your attending Physician, and must be signed by Your attending Physician.

WHEN BENEFIT ACTIVATION / DEBT CANCELLATION STOPS. We will stop canceling Protected Monthly Benefits on the earliest of the following dates: **1)** You are no longer disabled; or **2)** We have canceled an amount equal to the Maximum Protected Balance for All Cause Disability shown in the Schedule; or **3)** Your Protected Loan has been discharged; or **4)** You have reached the Termination Age for Disability protection shown in the Schedule; or **5)** on the Addendum Expiration Date shown in the Schedule; or **6)** on the scheduled maturity date of Your Protected Loan.

JOINT DISABILITY PROTECTION. If You elected Joint Disability Protection, the Protected Borrower who becomes totally disabled first and satisfies the Waiting Period will become eligible for benefits. Each Protected Borrower must satisfy the Waiting Period separately, and if both Protected Borrowers are totally disabled at the same time, the days each Protected Borrower is disabled cannot be combined to satisfy the Waiting Period. If both Protected Borrowers are totally disabled at the same time, only one (1) Protected Monthly Benefit will be canceled.

RECURRENT DISABILITY EVENTS. If You incur a Disability within two (2) weeks following termination of a prior Disability Debt Cancellation period from the same cause of loss or a complication of the same cause of loss, the Waiting Period will not apply, and Your Disability will be considered a continuation of the preceding Disability for the purpose of determining the Benefit Activation date. If You incur a Disability more than two (2) weeks following the termination of a prior Disability Debt Cancellation period, Your Disability will be considered a new Protected Event, and a new Waiting Period will apply.

PHYSICAL EXAMINATIONS. Independent of Your responsibility to provide written certification of Your Disability from Your attending Physician, We reserve the right to require evidence of or confirmation of Your Disability from a Physician of our choice and at our expense at reasonable intervals in order to justify the continuation of canceling the Protected Monthly Benefit.

ACCIDENTAL DISABILITY (Ages 66 through 70)

ACCIDENTAL DISABILITY. means an INJURY You incur after the ADDENDUM Effective Date and lasts for at least the consecutive number of days shown in the Schedule as the WAITING PERIOD and causes You to be unable to substantially perform the duties of the occupation in which You were engaged on the DATE OF LOSS You incurred Your DISABILITY. DISABILITY must be certified by a licensed physician and You must be under the regular care and treatment of a physician for any period of DISABILITY claimed.

PROTECTED MONTHLY PAYMENT CANCELLATION. During one or more eligible periods of DISABILITY, after You have been disabled for and satisfied the WAITING PERIOD shown in the Schedule beginning on the day the PROTECTED MONTHLY PAYMENT CANCELLATION BEGINS ON as shown in the Schedule and qualified for PROTECTED MONTHLY PAYMENT activation, We will cancel the PROTECTED MONTHLY PAYMENT beginning on the day the PROTECTED MONTHLY PAYMENT CANCELLATION BEGINS ON as shown in the Schedule. Cancellation of the PROTECTED MONTHLY PAYMENTS will stop at the earliest of the date: 1) You are no longer disabled; or 2) the ADDENDUM Expiration Date has been reached; or 3) the MAXIMUM TOTAL AMOUNT OF CANCELED PROTECTED MONTHLY PAYMENTS shown in the Schedule has been reached; or 4) the MAXIMUM TOTAL NUMBER OF CANCELED PROTECTED MONTHLY PAYMENTS have been canceled; or 5) the scheduled maturity date of the PROTECTED LOAN. A canceled amount for any period of DISABILITY less than 30 days will be calculated at a rate of 1/30th of the PROTECTED MONTHLY PAYMENT for each day of such period. The PROTECTED MONTHLY PAYMENT is subject to the MAXIMUM TOTAL NUMBER OR TOTAL AMOUNT OF CANCELED PROTECTED MONTHLY PAYMENTS shown in the Schedule. A recurrent DISABILITY due to the same or related cause(s) separated by less than two (2) weeks of active work shall be deemed the same period of DISABILITY and shall not be subject to a new WAITING PERIOD.

EXCLUSIONS. The PROTECTED MONTHLY PAYMENT or PROTECTED BALANCE will not be eligible for cancellation if the cause of ACCIDENTAL DISABILITY is as a result of, arises out of, or is contributed by: 1) Elective surgery; 2) Intentionally self-inflicted injuries; 3) Use of alcohol or other intoxicants; 4) Use of any drug, sedative or narcotic, unless as prescribed by a licensed treating physician; 5) Participation in a riot or commission of an assault or felony; 6) Normal Pregnancy.

If You elected single protection and Your ACCIDENTAL DISABILITY is related to or caused by the Exclusions above, or does not meet the requirements for cancellation, Our liability will be limited to termination of this ADDENDUM and a pro-rata refund of any unearned PROTECTION FEES paid.

If JOINT PROTECTION is elected, each BORROWER must satisfy the WAITING PERIOD requirements separately and days of disability may not be combined.

If both the Primary Borrower and Co-Borrower are disabled and eligible to receive cancellation of a PROTECTED MONTHLY PAYMENT at the same time only one PROTECTED MONTHLY PAYMENT will be canceled during any one scheduled loan payment period.

If Your ACCIDENTAL DISABILITY is excluded or does not meet the requirements for cancellation, our liability will be limited to termination of this ADDENDUM and a pro rata refund of the unearned Protection Fee paid. If you elected JOINT PROTECTION, this ADDENDUM will remain in force for the surviving Borrower

CRITICAL PERIOD INVOLUNTARY UNEMPLOYMENT EVENTS

This section applies to You if You have chosen Option #4.

INVOLUNTARY UNEMPLOYMENT (referred to as "Involuntary Unemployment" or "IU" herein) means that You suffer a total loss of salary or wages due to one of the following: **1) involuntary Layoff** – meaning a temporary or permanent suspension of Your employment by Your employer; or **2) termination by Your employer** – meaning a complete severance of Your employment by Your employer for reasons other than willful or criminal misconduct; or **3) General Strike** – meaning a strike against all the employers in an industry or a territory and consisting of a simultaneous cessation or quitting of work by a body of employees, including You, acting in combination for the purpose of obtaining more desirable terms of employment; or **4) Unionized Labor Dispute** – meaning a chartered or previously organized trade or labor union through the coalition of its members, including You, has authorized a strike to obtain higher wages, shorter hours of employment, better working conditions, or some other concession from Your employer by the employees stopping work at a predetermined time, and it involves a combination of persons and not a single individual. Non-union collective bargaining is not to be included within this definition; or **5) Lockout** – meaning Your employer's discharge of employees, including You, or the temporary closing of Your place of employment, because of: **a) a labor dispute**; or **b) Your employer's dislike of employees' union activities**; or **c) the temporary closing of the place of employment by Your employer without formally discharging the employees, including You, to: (i) discourage union activities; or (ii) gain acceptance of the employer's views; or (iii) effect a compromise, which is more favorable to the employer than the demands made by the employees.**

BENEFIT ACTIVATION. To be eligible for Benefit Activation: **1) Your Involuntary Unemployment must begin more than six (6) months after the Effective Date of this Addendum or the effective date of any subsequent Advance; and 2) You must be Actively at Work for six (6) months prior to the date You become involuntarily unemployed; and 3) You must be involuntarily unemployed longer than the Waiting Period shown in the Schedule; and 4) during one (1) or more eligible periods of Involuntary Unemployment to become eligible to receive Benefit Activation, the following must occur or have occurred: a) You have satisfied the Qualifying Employment Period shown in the Schedule; and b) You have been involuntarily unemployed longer than the Waiting Period shown in the Schedule; and c) You must have satisfied the Vesting Period shown in the Schedule; and d) there must be an outstanding balance on Your Protected Loan, and according to the terms of Your Loan Agreement, there must be scheduled Loan Payments due; and e) the Administrator must receive proof of Your Involuntary Unemployment; and f) You must be Actively Seeking Employment.**

During one (1) or more eligible periods of Involuntary Unemployment, beginning on the day Protected Monthly Benefit Cancellation Begins in the Schedule, after We have received proof that You are involuntarily unemployed and You have qualified for Benefit Activation, Your Benefit Activation will begin on the day shown under "Protected Monthly Benefit Cancellation Activation Begins On" in the Schedule, and We will cancel the Protected Monthly Benefit.

If We cancel less than the Maximum Number of Protected Monthly Benefits per Occurrence shown in the Schedule during any one (1) period of Involuntary Unemployment, the remaining Protected Monthly Benefits may be canceled during future periods of Involuntary Unemployment up to the Maximum total Number of Protected Monthly Benefits shown in the Schedule.

WHEN BENEFIT ACTIVATION/DEBT CANCELLATION STOPS. We will stop canceling Protected Monthly Benefits on the earliest of the following dates: **1) when You are no longer involuntarily unemployed; or 2) when You are no longer Actively Seeking Employment; or 3) when Your Protected Loan has been discharged; or 4) when You have reached the Termination Age shown in the Schedule; or 5) when We have canceled the Maximum Total Number of Protected Monthly Benefits shown in the Schedule; or 6) when the sum of the Protected Monthly Benefits We have canceled is equal to the Maximum Total Amount of Canceled Protected Monthly Benefits shown in the Schedule.**

RECURRENT EVENTS. If You return to work and become Involuntarily Unemployed again within thirty (30) days, We will not require another Waiting Period before canceling the Protected Monthly Benefits. We will not cancel any part of a Protected Monthly Benefit for the periods You return to work. If after You return to work You become involuntarily unemployed more than thirty (30) days later, a new Protected Event will begin, and a new Waiting Period will apply.

If You have questions about the PROTECTED EVENT, call the ADMINISTRATOR at 1-800-899-6502, DEBT PROTECTION DIVISION.