



**AIG Commercial Insurance
Company of Canada**
145 Wellington Street West
Toronto, ON M5J 1H8
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SPECIAL RISK ACCIDENT INSURANCE

PROPOSAL FOR:

KIN CANADA

Requested by:

HKMB HUB International

595 Bay St., Suite 900 Toronto, Ontario
M5G 2E3

Presented by:

AIG Commercial Insurance Company of Canada

AIG Accident & Health

145 Wellington Street West, Toronto, Ontario M5J 1H8
Tel: (416) 596-3000 A&H Fax: (416) 596-4067
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SECTION I - OVERVIEW

AIG COMMERCIAL INSURANCE COMPANY OF CANADA

AIG Commercial Insurance Company of Canada, is a member company of American International Group, Inc. (AIG) and takes pride in offering a comprehensive line of competitive products that are designed to meet the needs of complex and sophisticated organizations.

AIG Commercial Insurance Company of Canada is proud to have their own division dedicated to the Accident & Health business. This expertise has helped develop the A & H Division into a premier marketer of corporate and occupational accident programs, a leader in accident programs for recreational and sporting activities, as well as one of the few international travel insurers providing round-the-clock protection for student and intercultural exchanges, missionary groups and domestic and international companies. We underwrite approximately 5,000 accounts in Canada, and our client base is divided equally between specialty market products and our corporate plans.

With the Head Office of our Canadian Operations located in Toronto and service offices in Montreal and Vancouver, we meet the demands of our clients nationwide.

Our Head Office team consists of long term, dedicated staff with a combined industry history of over 150 years, 115 at AIG Commercial Insurance Company of Canada!

AMERICAN INTERNATIONAL GROUP, INC.

American International Group, Inc. (AIG) is the leading U.S.-based international insurance organization and the largest underwriter of commercial and industrial insurance in the United States. Its member companies write property, casualty, marine, life, and financial services insurance in approximately 130 countries and jurisdictions and are engaged in a range of financial services businesses. AIG's common stock is listed on the New York Stock Exchange, as well as the stock exchanges in London, Paris, Switzerland, and Tokyo.

About American International Group, Inc.

- A world leader in insurance and financial services
- The leading United States based international insurance organization
- The largest and most extensive worldwide life insurance network
- In Canada, approximately 640 employees
- Over 116,000 dedicated employees in approximately 130 countries and jurisdictions

SECTION II – PRODUCT IMPORTANCE

THE NEED FOR SPECIAL RISK ACCIDENT INSURANCE

Modern technology and experience has helped to greatly reduce the risk of accidents. Unfortunately, they still happen, and on a daily basis. Needless to say, personal loss of any kind is immutable, but without insurance the financial strain can be further devastating.

Insurance can't prevent an accident, but it can help reduce the financial burden incurred when an accident happens, and assist your employee in meeting the demands of the future, at a level of which they have become accustomed.

Advantages of a Casualty Company

- Competitive pricing.
- Personalized service.
- Our policy format can be specialized to meet the client's specific needs.

AIG Commercial Insurance Company of Canada Advantages

- Regionally-based administration, sales and underwriting.
- Competitive rates and solid value.
- Peace of mind that comes with doing business with an insurer possessing great financial strength.
- Advantages of being a member company of American International Group Inc. (AIG): flexibility, experience, and global presence.

SECTION III – PLAN DESIGN

Plan Summary		Description
Eligibility	Class I:	All volunteers of a participating Club of the Policyholder, under the age of 75.
Termination Provision		terminates the earlier of age 75 or retirement.
Coverage:		Accidental Death & Dismemberment, while engaged in activities in their position as a volunteer of the Policyholder, which are supervised by and at the direction of the Policyholder.
War Risk Rider		NO
Principal Sum Amount:	Class I:	\$20,000.
Aggregate Limit per any one accident		\$300,000.
ADDITIONAL BENEFITS		MAXIMUM AMOUNT
Permanent and Total Disability		\$20,000.
Weekly Accident Indemnity Benefit All Members of class 1 under age 65		\$100 per week, 0 day wait, payable 17 wks
Accidental Para-Medical Expense Reimbursement Benefit		\$10,000. maximum (\$300. chiro/physio)
Accidental Dental Expense Reimbursement		\$1,000.
Rehabilitation Benefit		Within 2 years –maximum \$10,000.
Home Alteration and Vehicle Modification		To a maximum of \$10,000.
In-Hospital Benefit		1% of P.S. max. \$2,500./mth – 12 mths
Family Transportation		100 km – maximum of \$10,000.
Repatriation Benefit		50 m – maximum of \$10,000.
Artificial limbs, eyes, hearing aids & other prosthetic appliances		Max \$5,000.
Eyeglasses and Contact Lens Expense		Max \$200.
Emergency Transportation		Max. \$100.
Fracture Benefit		Max \$500.00
Premium Rate:		\$0.15 per person per month (subject to 100% participation within each Club)
Rate Guarantee:		2 years
Estimated Annual Premium based on 524 Clubs w/7,500 Insured Members		\$13,500. for the first policy year

SECTION IV – TABLE OF LOSSES

ACCIDENTAL DEATH AND DISMEMBERMENT BENEFIT

The Company shall pay the amount specified in the Table of Losses, if an Insured Person sustains a Loss stated therein resulting from Injury, provided that:

- (a) such Loss occurs within three hundred and sixty-five (365) days after the date of accident causing such Loss;
- (b) the amount of the benefit payable for any such Loss shall be the amount set out in the Table of Losses, for that specific Loss; and
- (c) if more than one (1) Loss is sustained as the result of any accident, only one (1) benefit shall be payable, the largest.

Loss of Life	The Principal Sum
Loss of Both Hands or Both Feet	The Principal Sum
Loss of Entire Sight of Both Eyes	The Principal Sum
Loss of One Hand and One Foot	The Principal Sum
Loss of One Hand and the Entire Sight of One Eye.....	The Principal Sum
Loss of One Foot and the Entire Sight of One Eye	The Principal Sum
Loss of One Arm or One Leg.....	Four-Fifths of The Principal Sum
Loss of One Hand or One Foot	Three-Quarters of The Principal Sum
Loss of The Entire Sight of One Eye	Three-Quarters of The Principal Sum
Loss of Thumb and Index Finger of the Same Hand	One-Third of The Principal Sum
Loss of Speech and Hearing	The Principal Sum
Loss of Speech or Hearing	Three-Quarters of The Principal Sum
Loss of Hearing in One Ear	Two-Thirds of The Principal Sum
Loss of Four Fingers of One Hand	One-Third of The Principal Sum
Loss of All Toes of One Foot	One-Quarter of The Principal Sum

Loss of Use

Loss of Use of Both Arms or Both Hands.....	The Principal Sum
Loss of Use of One Hand or One Foot.....	Three-Quarters of The Principal Sum
Loss of Use of One Arm or One Leg	Four-Fifths of The Principal Sum

Paralysis

Quadriplegia (total paralysis of both upper and lower limbs)	The Principal Sum
Paraplegia (total paralysis of both lower limbs).....	The Principal Sum
Hemiplegia (total paralysis of upper and lower limbs of one side of the body)	The Principal Sum

DISAPPEARANCE

If the body of an Insured Person has not been found within one (1) year of the forced landing, stranding, sinking or wrecking of a conveyance in which such person was an occupant, then, such Insured Person shall, in the absence of any evidence to the contrary, be deemed to have suffered Loss of Life.

AGGREGATE LIMIT PER ACCIDENT

The maximum amount payable by the Company for two (2) or more Insured Persons as Injured in any one (1) accident is the amount which is the Aggregate Limit per Accident.

If the total of the benefits which would be paid by the Company would exceed the Aggregate Limit per Accident, the Company shall not be liable to any one (1) Insured Person for any amount in excess of the Aggregate Limit per Accident. Each injured Insured Person's benefits shall be a portion of the benefits to which they otherwise would have been entitled. That portion shall be the proportion of what the Company would have paid to the Insured Person relative to what the Company would have paid to all Insured Persons Injured in such accident but for the Aggregate Limit per Accident.

SECTION V – ADDITIONAL BENEFIT

WEEKLY ACCIDENT INDEMNITY BENEFIT

- (a) If an Insured Person under the age of 65 suffers Injury causing Total Disability, the Company shall pay a Weekly Accident Indemnity Benefit during a period of continuous Total Disability subject to the following conditions:
 - (i) the period of Total Disability must commence within thirty (30) days after the date of the accident causing Injury;
 - (ii) benefits shall be payable in the amount or at the rate stated in the contract as applicable to such person and subject to the limitation and exclusions contained in the contract;
 - (iii) the benefit is only payable if the Insured Employee remains wholly and continuously Totally Disabled throughout the Waiting Period and during any period of Total Disability;
 - (iv) benefits shall be payable for a period of Total Disability commencing on the first day of Total Disability;
 - (v) the maximum period for which benefits shall be paid for any one period of Total Disability shall not exceed the Maximum Number of Weeks Payable as stated in the contract; and
 - (vi) if the contract provides for a Permanent and Total Disability benefit, weekly accident indemnity benefits hereunder cease on the date the Insured Person satisfies the definition of Permanent and Total Disability and qualifies for such benefit.
- (b) Disability resulting from the same accident or from related accidents shall be considered as one period of Total Disability unless the periods of disability are separated by the Insured Person's active return to work on a full-time basis for at least six (6) consecutive months. Successive periods of disability resulting from different and unrelated causes shall also be considered as a single period of disability unless the Insured Person has totally recovered from the first disability at the beginning of the second disability and has actively returned to work on a full-time basis at full salary for at least one (1) entire day.

PERMANENT AND TOTAL DISABILITY

If an Insured Person suffers Injury causing Permanent and Total Disability, and after 12 months of total and permanent disability cannot perform at least two Activities of Daily Living without assistance from another person, for the remainder of his or her life, the Company shall pay the amount which is 100% of the Principal Sum for the Insured Person less any amounts under the Table of Losses which have been paid or which are payable by the Company for Losses of the Insured Person. The disability must be determined to be total, permanent, and irreversible and certified to be such by a licensed Physician acceptable to the Company. The Insured Person's inability to actually obtain employment is not a criteria to qualify for the Permanent and Total Disability benefit.

Activities of Daily Living means activities used in measuring levels of personal functioning capacity. Normally, these activities are performed without assistance, allowing personal independence in everyday living.

1. Maintaining continence: controlling urination and bowel movements, including the ability to use ostomy supplies or other devices such as catheters;
2. Transferring: moving between a bed and a chair, or a bed and a wheelchair;
3. Dressing: putting on and taking off all necessary items of clothing;
4. Toileting: getting to and from a toilet, getting on and off a toilet, and performing associated personal hygiene;
5. Eating: performing all major tasks of getting food into the body; and
6. Bathing: washing in either a tub or shower, including the task of getting in or out of the tub or shower.

ACCIDENTAL PARA-MEDICAL EXPENSE REIMBURSEMENT BENEFIT

If as a result of Injury, and within thirty (30) days from the date of the accident causing such Injury, the Insured Person, who must be insured under a Canadian provincial or territorial government health insurance plan, obtains medical treatment in Canada from a legally qualified Physician and as a consequence of such Injury incurs expenses for any of the following services when recommended by a legally qualified Physician, the Company shall reimburse the Insured Person the reasonable and necessary expenses for the following para-medical services:

- (a) private duty nursing by a licensed graduate nurse (R.N.), who does not ordinarily reside in the Insured Person's home and who is not a member of his/her Immediate Family. This benefit is payable up to fifty dollars (\$50.00) per hour to a maximum of five thousand dollars (\$5,000.00) per Insured Person for all Injuries resulting from any one accident;
- (b) transportation, when such service is provided by a professional ambulance service to the nearest approved Hospital which is equipped to provide the required and recommended necessary treatment. This benefit is payable up to a maximum of five thousand dollars (\$5,000.00) per Insured Person for all Injuries resulting from any one (1) accident;
- (c) Hospital charges for the difference between the public ward allowance under the Insured Person's provincial or territorial government health insurance plan and the semi-private accommodation charge for a semi-private Hospital room. This benefit is payable up to a maximum of five thousand dollars (\$5,000.00) per Insured Person for all Injuries resulting from any one (1) accident;
- (d) rental of a wheelchair, iron lung or other durable equipment, not to exceed the purchase price prevailing at the time rental became necessary;
- (e) fees for services of a licensed physiotherapist. This benefit is payable up to a maximum of three hundred dollars (\$300.00) per Insured Person for all Injuries resulting from any one (1) accident;
- (f) prescription drugs and medicines (except in the Province in Quebec);
- (g) expenses for hearing aids, crutches, splints, casts, trusses and braces, but excluding replacement thereof; and
- (h) fees for services of a licensed chiropractor. This benefit is payable up to a maximum reimbursement of three hundred dollars (\$300) per Insured Person for all Injuries resulting for any one (1) accident.

Reimbursement shall only be made provided that expenses are:

- (a) incurred in Canada;
- (b) incurred within fifty-two (52) weeks of the date of the accident causing Injury;
- (c) incurred only for therapeutic and not elective treatment; and
- (d) which are supported by original receipts submitted to the Company as proof of claim.

This benefit is in excess of any similar benefit provided under any other insurance, policy or plan, including but not limited to a policy of automobile insurance and any federal or provincial hospital, medical or drug plan.

The maximum amount payable for this benefit is ten thousand dollars (\$10,000.00) per Insured Person for all Injuries resulting from any one (1) accident.

ACCIDENTAL DENTAL EXPENSE REIMBURSEMENT

If the Insured Person suffers Injury to whole and sound teeth, and within thirty (30) days from the date of the accident causing such Injury obtains treatment in Canada for such Injury from a legally qualified dentist or dental surgeon and incurs related dental expenses, the Company shall reimburse the Insured Person the amount for such dental expenses up to the amount allowed for such service in the General Practitioner Schedule of Fees and Treatment Services of the Provincial Dental Association in the province or territory in which the Insured Person receives such treatment.

Reimbursement shall only be made provided that expenses are:

- a) incurred in Canada;
- b) incurred within fifty-two (52) weeks of the date of the accident causing Injury;
- c) incurred only for therapeutic and not elective or aesthetic treatment; and
- d) which are supported by original standard dental claim form submitted to the Company as proof of claim.

This benefit is in excess of any similar benefit provided under any other insurance, policy or plan, including but not limited to a policy of automobile insurance and any federal or provincial hospital, medical or drug plan.

The maximum amount payable for this benefit is one thousand dollars (\$1,000.00) dollars per Insured Person for all Injuries resulting from any one (1) accident.

REHABILITATION BENEFIT

If an Insured Person suffers Injury resulting in a Loss (other than Loss of Life) for which the Company has paid a benefit set out in the Table of Losses, the Company shall pay the reasonable and necessary expenses actually incurred for the occupational training of the Insured Person, provided that:

- (a) such training is required because of such Injury and in order for the Insured Person to be qualified to engage in an occupation in which he or she would not have been engaged except for having suffered such Injury;
- (b) the training expenses are incurred within two (2) years from the date of the accident causing such Injury; and
- (c) no payment shall be made for ordinary living, travelling or clothing expenses.

The maximum amount payable for this benefit for all Injuries resulting from any one (1) accident is ten thousand dollars (\$10,000.00) per Insured Person.

HOME ALTERATION AND VEHICLE MODIFICATION

If an Insured Person suffers Injury resulting in a Loss (other than Loss of Life) for which the Company has paid a benefit set out in the Table of Losses and which Loss results in and necessitates the use of a wheelchair in order for the Insured Person to be ambulatory, the Company shall pay the reasonable and necessary expenses actually incurred for:

- (a) the one-time cost of alterations to the injured Insured Person's residence to make the residence wheel-chair accessible and habitable; and
- (b) the lesser of:
 - (i) the one-time cost of modifications necessary to a motor vehicle, owned by the injured Insured Person, to make the vehicle accessible or drivable for the Insured Person; and
 - (ii) the one-time cost to purchase a wheelchair accessible specially modified vehicle, with the prior approval of the Company.

This benefit is payable only if:

- (a) home alterations are made on behalf of the Insured Person and carried out by an experienced individual in such alterations and recommended by a recognized organization, providing support and assistance to wheel-chair users; and
- (b) vehicle modifications are made on behalf of the Insured Person and carried out by an experienced individual in such matters and modifications are approved by the Provincial vehicle licensing authorities in the Insured Person's province of residence.

The maximum amount payable for this benefit for all Injuries resulting from any one (1) accident is ten thousand dollars (\$10,000.00) per Insured Person.

IN-HOSPITAL BENEFIT

If an Insured Person suffers Injury resulting in a Loss (other than Loss of Life) for which the Company has paid a benefit set out in the Table of Losses, and as a consequence of such Loss the Insured Person is, pursuant to the instructions of a Physician, confined to a Hospital for more than five (5) consecutive overnight stays, the Company will pay:

- (a) for a period of confinement in Hospital of more than thirty (30) consecutive overnight stays, 1% of the Insured Person's Principal Sum; or
- (b) for a period of confinement of thirty (30) consecutive overnight stays or less, one thirtieth (1/30) of the amount for each overnight stay in Hospital.

The Company will pay this benefit monthly, retroactive to the first (1st) overnight stay of confinement in Hospital.

The maximum amount payable for this benefit for all Injuries resulting from any one (1) accident per Insured Person is two thousands five hundred dollars (\$2,500.00) per month.

Benefits are not payable for more than a total of twelve (12) months of confinement for any one (1) accident causing Injury.

Successive periods of confinement to Hospital for Injury resulting from the same accident, if separated by a period of less than three (3) months, are considered one (1) period of confinement to Hospital for the purposes of calculating this benefit.

FAMILY TRANSPORTATION

If an Insured Person suffers Injury resulting in a Loss (other than Loss of Life) set out in the Table of Losses and if such Loss requires that the Insured Person be confined to a Hospital located more than one hundred (100) kilometres from his or her permanent place of residence, the Company shall pay the reasonable and necessary expenses actually incurred for the transportation of one (1) Immediate Family member to such Hospital. This benefit is only payable if:

- (a) confinement to Hospital occurs within three hundred and sixty-five (365) days of the accident causing Injury; and
- (b) reimbursement of expenses are limited to the cost of one (1) economy class return airfare via the most direct route, or the equivalent amount toward another type of common carrier transportation for such Immediate Family member.

The maximum amount payable for this benefit for all Injuries resulting from any one (1) accident is ten thousand dollars (\$10,000.00) per Insured Person.

REPATRIATION BENEFIT

If an Insured Person suffers Injury causing Loss of Life and:

- (a) such Loss of Life occurs more than fifty (50) kilometres from his or her permanent city of residence; and
- (b) such Loss of Life occurs within three hundred and sixty-five (365) days of the date of the accident causing the Injury,

the Company shall pay the actual expenses incurred for preparing the deceased Insured Person for burial or cremation and shipment of the body to the city of residence of the deceased Insured Person.

The maximum amount payable for this benefit for all Injuries resulting from any one (1) accident is ten thousand dollars (\$10,000.00) per Insured Person.

ARTIFICIAL LIMBS, EYES, HEARING AIDS AND OTHER PROTHETIC APPLIANCES

When, as a result of Injury requiring and receiving medical or surgical treatment within 30 days of the date of the accident, artificial limbs, eyes, hearing aids and other prosthetic appliances are prescribed by a Physician or Surgeon and initially purchased within two years from the date of accident, the Company will pay the cost of such appliances, up to a maximum of \$5,000.00 as a result of any one accident.

EYEGLASSES AND CONTACT LENS EXPENSE

Eyeglasses and Contact Lens Expense - up to \$200.00 for repairs or replacement of eyeglasses or contact lenses when damages result from an accident which required the Insured Person to receive treatment by a legally qualified Physician.

EMERGENCY TRANSPORTATION

When injury necessitates medical attention, the Company will pay the reasonable expenses incurred for commercial land transportation of an Insured Person to and from a doctor's office, medical clinic, or nearest hospital, subject to a maximum of \$100.00.

FRACTURE BENEFIT

If an Insured Person sustains Injury resulting in a fracture or dislocation listed in the following Fracture Table, the Company shall pay the indemnity amount specified in the Fracture Table, provided that such fracture or dislocation receives medical or surgical treatment within thirty (30) days of the date of the accident.

The maximum amount payable for this benefit is five hundred (\$500.00) dollars per Insured Person for all Injuries resulting from any one (1) accident. However, not more than one such indemnity (the largest) shall be payable as a result of any one (1) accident.

Fracture Table

For fracture of bone or bones:	By	By Open Operation
	Fixation	Crafting of Metallic Fixation
Reduction of Skull (Cranium)	\$125.00	\$500.00
Femur	\$ 50.00	\$ 75.00
Tibia and Fibula, Both	\$ 50.00	\$ 75.00
Tibia and Fibula, Either	\$ 25.00	\$ 50.00
Spine (Except Coccyx)	\$ 60.00	\$100.00
Humerus	\$ 50.00	\$ 80.00
Radius and Ulna, Both	\$ 50.00	\$ 75.00
Radius and Ulna, Either	\$ 25.00	\$ 50.00
Sternum	\$ 30.00	\$ 50.00
Coccyx	\$ 30.00	\$ 50.00
Finger or Toe	\$ 15.00	\$ 25.00
Rib or Ribs	\$ 20.00	\$ 35.00
Lower Jaw (Alveolar Process Excepted)	\$ 30.00	\$ 50.00
Pelvis (Except Coccyx)	\$125.00	\$250.00
Bones of Hand or Foot (Except Fingers of Toes)	\$ 25.00	\$ 40.00
Clavicle	\$ 25.00	\$ 45.00
Bones of Nose or cheek	\$ 15.00	\$ 30.00
Patella	\$ 50.00	\$ 75.00
Scapula	\$ 65.00	\$100.00

“**Cranium**” means the vault of the skull *consisting* of the following bones: frontal, parietals, occipital, temporals, sphenoid and ethmoid.

SECTION VI – EXCLUSIONS

The policy does not cover any loss, fatal or non-fatal, caused by or resulting from:

- (a) suicide or any attempt thereof by the Insured Person while sane;
- (b) self inflicted Injury or any attempt thereof by the Insured Person while sane or insane;
- (c) declared or undeclared war or any act thereof;
- (d) sickness, disease, or bodily infirmity whether the Loss or claim results directly or indirectly from any of these;
- (e) mental incapacity whether the Loss or claim results directly or indirectly from any mental incapacity;
- (f) sustained while the Insured Person is undergoing the medical or surgical treatment of sickness, disease, or bodily or mental infirmity;
- (g) stroke or cerebrovascular accident or event, cardiovascular accident or event, myocardial infarction or heart attack, coronary thrombosis; aneurysm;
- (h) travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is:
 - (i) riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
 - (ii) performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft; or
 - (iii) riding as a passenger in an Owned Aircraft or Leased Aircraft operated by the Policyholder.
- (i) infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;
- (j) injury or Loss sustained while the Insured Person is on full-time active duty in the armed forces or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured Person is on full-time active duty shall, upon application to the Company by the Policyholder, be refunded);
- (k) injury or Loss sustained while the Insured Person is under the influence of alcohol and operating any vehicle or means of transportation or conveyance while his or her blood alcohol is over eighty (80) milligrams in one hundred (100) millilitres of blood;
- (l) injury or Loss sustained while the Insured Person is under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a duly licensed Physician;
- (m) the commission or attempted commission by an Insured Person or Injury incurred while an Insured Person is in the course of committing or attempting to commit any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed;
- (n) an act, attempted act or omission taken or made by the Insured Person, or an act, attempted act or omission taken or made with the Insured Person's consent, for the purposes of interrupting the blood flow to the Insured Person's brain or to cause asphyxiation to the Insured Person whether with intent to cause harm or not;
- (o) natural causes; and
- (p) an accident occurring while the Insured Employee is not engaged in an Occupational Activity.

SECTION VII – CLAIMS SERVICE

- Our Claims Department has a full team of experienced and dedicated A&H claims examiners managed by Debbie Donadel who has close to 30 years of experience in the Insurance Industry.
- Our turnaround time on a fully documented claim is 10 business days.

SECTION VIII – CRITERIA

1. Our quotation is valid for 90 days from the date of our proposal.
2. Our proposal is based on our standard benefit provisions.
3. The plan is to be self-administered on a monthly reporting basis.
4. If required, service, policy format, booklets etc., are available in both French and English, in paper and electronic formats.
5. AIG Commercial Insurance Company of Canada will contribute up to 3% of the annualized premium towards the printing costs of booklets.
6. AIG Commercial Insurance Company of Canada has a toll free number operating between 8:00 to 5:00, with service available in both French and English.
7. AIG Commercial Insurance Company of Canada is in compliance with PIPEDA. All claim information is kept strictly confidential between the claimant and AIG Commercial Insurance Company of Canada.
8. Your account will be handled by the following team:

Underwriters

Dave Cloughton, Sr. Underwriter: (416) 596-4036 or e-mail dave.cloughton@aig.com

Laura Ferreira, Sr. Underwriter: (416) 596-4038 or e-mail laura.ferreira@aig.com

Robert Cosentino, Underwriter: (416) 596-3978 or e-mail robert.cosentino@aig.com

Danielle Boisvert, Assistant Vice President Underwriting: (416) 596-4035 or
e-mail danielle.boisvert@aig.com

Accounting

Cassie Grannum: (416) 596-4033 or e-mail cassie.grannum@aig.com

Claims

Debbie Donadel, Assistant Vice President, Claims: (416) 596-2733 or e-mail debbie.donadel@aig.com

General Enquiries : (416) 596-4005 or e-mail ahclaimscan@aig.com

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Toronto : 800 387-4481

Dave Cloughton

Senior Underwriter

March 23, 2009

Date