

NATIONAL INCOME LIFE INSURANCE COMPANY
HOME OFFICES: P.O. Box 5009, Syracuse, New York 13220

POLICYHOLDER

CERTIFICATE NUMBER

INSURED

CWA 1170

The benefits provided by the Master Policy are indicated below. The Master Policy was issued to the policyholder. This certificate is a summary of that policy. The policy is governed by the laws of the state where it was delivered.

WHO IS COVERED -- This is who is covered:

YOU, YOUR SPOUSE, YOUR CHILD, STEPCHILD, OR LEGALLY ADOPTED CHILD WHO IS UNMARRIED, DEPENDENT ON YOU FOR SUPPORT, AND UNDER AGE 19.

YOU MEANS: ALL ACTIVE MEMBERS, RETIREES & STAFF

If you fit the definition on the policy issue date, you were covered on that date. If not, you were covered when you first fit the definition. All coverage ends if the policy terminates.

Your coverage will end when you no longer fit the definition.

BENEFITS FOR ACCIDENTAL LOSS

LOSS OF:

LIFE				LOSS OF:		
BOTH HANDS				ONE HAND		
BOTH FEET				ONE FOOT		
SIGHT OF BOTH EYES				SIGHT OF ONE EYE		
ONE HAND AND ONE FOOT	\$2,500	YOU			\$1,250	YOU
ONE HAND AND SIGHT OF ONE EYE	\$1,000	SPOUSE			\$500	SPOUSE
ONE FOOT AND SIGHT OF ONE EYE	\$500	CHILD			\$250	CHILD

Loss of a hand means cut off through or above the wrist. Loss of a foot means cut off through or above the ankle. Loss of sight means blindness which cannot be corrected to at least 20/200 vision. Any loss must occur within 90 days of the accident to be payable. Only one of the amounts, the greater, will be paid for all losses resulting from the same accident.

EXCLUSIONS -- The Policy does not cover loss due to:

1. Suicide or intentionally self-inflicted injury;
2. Sickness, disease, medical treatment or surgery unless incident to a covered accident;
3. Being intoxicated or under the influence of any narcotic unless administered on the advice of a physician;
4. Aviation, other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline;
5. Participation in a felony;
6. Taking part in a riot or insurrection; or
7. War or any act of war, or any injury sustained while serving in the military forces engaged in war whether declared or undeclared.

GROUP ACCIDENTAL DEATH AND DISMEMBERMENT CERTIFICATE
NONCONTRIBUTORY - NONPARTICIPATING

TG-20 NP NY



POLICYHOLDER
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DATE OF BIRTH

I accept this insurance and designate B as my beneficiary.
Beneficiary's Name Relationship

Insured's Signature

Date

Licensed Resident Agent

TG-20 NP NY

GR129

GENERAL PROVISIONS

- Notice of Loss:** Written notice of loss must be given within 20 days, or as soon as reasonably possible.
- Proof of Loss:** Written proof of loss must be given within 120 days after the date of loss, or as soon as reasonably possible.
- Forms for Proof:** When we receive notice of claim, we will send any required claim forms within 15 days. If the person making the claim does not receive these forms within this time, proof of loss requirements will be met by sending us written proof of the occurrence, character, and extent of the loss.
- Examination, Autopsy:** We have the right, at our expense, to have the insured examined as often as reasonably necessary while a claim is pending. We may also have an autopsy made, unless prohibited by law.
- Time of Payment of Claims:** We will pay for any loss covered by the policy not more than 60 days after we receive proof of loss.
- Beneficiary; Payment of Claims:** Benefits payable under the policy will be payable to the Insured or to the beneficiary designated by the Insured, other than the Policyholder or an officer thereof as such. The beneficiary designation must be made in writing to our Home Office. If no beneficiary designation is effective, payment may be made to the Insured's estate. At our option, if no beneficiary designation is effective, or if the designated beneficiary is not competent to give a valid release, we may pay such insurance to any one or more of the following surviving relatives of the Insured: spouse, parents, children, or siblings. Any payment made in accordance with this provision will discharge us to the extent of such payment.
- Legal Actions:** No legal action may be brought on the policy within 60 days after proof of loss. No legal action may be brought on the policy more than six years after proof of loss was required.
- Change of Beneficiary:** You may change the beneficiary without his or her consent by sending us a signed written request.

