

THE PROTECTOR

ACCIDENT ONLY INSURANCE POLICY

Benefits include coverage for . . .

Fractures
Dislocation
Burns
Tendons-Ligaments
Eye Injury Surgery
Stitches or Staples
Physical Therapy
Emergency Room or Doctors Office
Ambulance
Blood and Plasma
Hospital Confinement
Intensive Care
Accidental Death and Dismemberment



ACCIDENTS HAPPEN

In the U.S., a Fatal Injury Occurs Every 5 Minutes
and a Disabling Injury Occurs Every 1.5 Seconds¹

¹*Injury Facts, 2003 Edition, National Safety Council*

With injuries, come unexpected costs.

Help protect yourself and your finances from these costs with the on and off the job coverage of either

The Protector I or The Protector II

ACCIDENTAL DEATH AND DISMEMBERMENT *

If death or dismemberment is the result of an accidental injury sustained in a covered accident, we will pay the following benefit if you incur a loss:

The PROTECTOR I	Named Insured	Spouse	Child
Loss of Life	\$12,500	\$12,500	\$3,125
One Limb Dismemberment	6,250	6,250	1,562.50
Two Limbs Dismemberment	12,500	12,500	3,125

The PROTECTOR II	Named Insured	Spouse	Child
Loss of Life	\$25,000	\$25,000	\$6,250
One Limb Dismemberment	12,500	12,500	3,125
Two Limbs Dismemberment	25,000	25,000	6,250

COMMON CARRIER ACCIDENTAL DEATH BENEFIT

four times the Loss of Life Benefit, for example: \$50,000 for the named insured with The PROTECTOR I or \$100,000 with The PROTECTOR II

AUTO RELATED DEATH BENEFIT

(sustained while driving or riding in highway licensed vehicle) two times the Loss of Life Benefit, for example: \$25,000 for the named insured with The PROTECTOR I or \$50,000 with The PROTECTOR II

GUARANTEED RENEWABLE/TERMINATION

This policy is guaranteed renewable for life subject to the Company's right to change rates on all policies of this class in your entire state. The only way your policy can be canceled is for failure to pay your premium or by your written request. Coverage of an insured child ends on the premium due date following: the attainment of age 21 (in ND, age 22) (in TX, age 25.) or age 25 (in ND, age 26) if enrolled full-time in an accredited college or university; or marriage, whichever occurs first. (In UT, attainment of age 26 or marriage, whichever occurs first.)

WAIVER OF PREMIUM

If the named insured becomes totally disabled for 60 days as a result of covered accident before the policy anniversary when you become age 60, premiums due after 60 days of continuous disability will be waived.

** Dismemberment means complete severance at or above the wrist or ankle joint. Only one benefit (the largest) is paid per covered insured as the result of any one accident. The loss must be incurred within 90 days (180 in UT) from the date of the accidental injury. (In PA, the loss must be incurred during the term of this policy.)*

The above facts represent the U.S. population, are for information only and do not imply coverage under the policy or endorsement of the company or the policy by the National Safety Council.

The Protector I	In or Out of Hospital Benefits	The Protector II
	For covered accidents occurring after the policy effective date and while the policy is in effect.	
To a maximum of \$100	Emergency Room Treatment (within 72 hours of accident). (within 72 hours does not apply in PA)	To a maximum of \$200
To a maximum of \$1,250 See Schedule	Bone Fracture (excluding chip fractures) Dislocated Joint. If more than one fracture or dislocation from one accident, benefit is To a maximum of 150% of the greater benefit amount.	To a maximum of \$2,500 See Schedule
To a maximum of \$250	Burns (third degree). Severed, Pulled or Torn Tendon or Ligament.	To a maximum of \$500
To a maximum of \$100	Eye Injury requiring (In NC, treatment by a physician.) surgical treatment. Laceration repaired by stitches or staples.	To a maximum of \$200
To a maximum of \$500	Artificial Limb.	To a maximum of \$1,000
To a maximum of \$50	Durable Medical Equipment (once every two years) such as braces, crutches, wheelchairs or respirator rental.	To a maximum of \$100
To a maximum of \$250	Physical therapy within 90 days of accident. (within 90 days of accident does not apply in PA)	To a maximum of \$500
To a maximum of \$50 per visit	Doctor/Physician to a maximum of 3 visits as outpatient per calendar year.	To a maximum of \$50 per visit

The Protector I	In Hospital Benefits	The Protector II
	For covered accidents occurring after the policy effective date and while the policy is in effect.	
To a maximum of \$50 per day Maximum of 90 days (\$4,500)	Hospital Confinement within 90 days of accident. (within 90 days of accident does not apply in PA)	To a maximum of \$100 per day Maximum of 90 days (\$9,000)
To a maximum of \$100 per day Maximum of 10 days (\$1,000)	Intensive Care within 90 days of accident. (In NC, paid in lieu of and not in addition to Hospital Confinement Benefit.) (within 90 days of accident does not apply in PA)	To a maximum of \$200 per day Maximum of 10 days (\$2,000)
To a maximum of \$20 per day	Doctor Visits (one per each day of confinement).	To a maximum of \$40 per day
To a maximum of \$500	Blood, Plasma, Platelets.	Actual charges
To a maximum of \$25 per day	Private Duty Nurse.	To a maximum of \$50 per day
To a maximum of \$140 After a One Year Waiting Period (No waiting period in MO)	Torn Knee Cartilage or Ruptured Disk.	To a maximum of \$280 After a One Year Waiting Period (No waiting period in MO)
To a maximum of \$250	Ambulance, ground or air, to hospital within 90 days of accident. (90 day limit does not apply in PA)	To a maximum of \$500
To a maximum of \$250 Round Trip or \$.25 per mile	Initial air, rail, or bus transportation for prescribed hospital treatment not available locally or mileage for 50 to 500 miles.	To a maximum of \$250 Round Trip or \$.50 per mile
\$.25 per mile (to a total "maximum" of \$125)	Follow-up transportation to same prescribed hospital for which initial transportation was paid (once per month, to a maximum of 6 months, until the "maximum" is paid). (In NC, total of 6 months.)	\$.50 per mile (to a total "maximum" of \$250)
To a maximum of \$50 per day	Lodging (if Transportation Benefit is paid and insured hospitalized) for one adult accompanying you when not in resident city. (In NC, maximum 90 days.)	To a maximum of \$100 per day

SPECIFIC INJURY BENEFIT SCHEDULE

THE PROTECTOR I

THE PROTECTOR PLUS II

Fractures	
Hip or Thigh.....	\$1,250
Vertebrae or Pelvis	925
Skull.....	470
Leg.....	375
Foot, Ankle, Kneecap.....	280
Hand, Wrist, Forearm.....	280
Lower Jaw, Shoulder Blade, Collar Bone.....	235
Upper Arm, Upper Jaw or Skull (Simple).....	185
Facial Bones (or nose)	140
Finger, Toe, Rib, or Coccyx.....	45
Dislocations	
Hip.....	\$1,250
Knee.....	375
Foot, Ankle, Shoulder.....	235
Hand, Lower Jaw.....	140
Wrist, Elbow.....	140
Finger, Toe.....	45

Fractures	
Hip or Thigh	\$2,500
Vertebrae or Pelvis	1,850
Skull.....	940
Leg.....	750
Foot, Ankle, Kneecap.....	560
Hand, Wrist, Forearm.....	560
Lower Jaw, Shoulder Blade, Collar Bone.....	475
Upper Arm, Upper Jaw or Skull (Simple).....	375
Facial Bones (or nose)	280
Finger, Toe, Rib, or Coccyx.....	90
Dislocations	
Hip.....	\$2,500
Knee	750
Foot, Ankle, Shoulder.....	470
Hand, Lower Jaw	280
Wrist, Elbow.....	280
Finger, Toe.....	90

In NM, we provide a \$1,250 Benefit for both Craniomandibular and Temporomandibular dislocations.

EXCLUSIONS AND LIMITATIONS

We will not pay benefits for loss or expenses incurred as a result of:

1. sickness, disease, or bodily infirmity; or
2. travel outside the territorial United States or Canada; or
3. suicide, attempted suicide, or intentionally self-inflicted injuries, regardless of whether inflicted while sane or insane ("regardless of whether inflicted while sane or insane" does not apply in PA). In MO, "while insane", does not apply. In VA, suicide, sane or insane, attempted suicide or intentionally self-inflicted injury is not covered; or
4. except in PA and VA, inhalation of fumes of gas unless inhaled in the course of employment or occupation, or taking of any kind of poison. In TN, acts must be intentional. In IA, GA, MN and NC, acts must be voluntary; or
5. except in MD, use of narcotics, sedatives, or under the influence of any drug (in LA, the use of or being under the influence of any narcotic or sedative), unless taken as prescribed by a physician. In VA, alcoholism, intoxication or under the influence of any narcotic, unless taken on the advice of a physician is not covered. In MN and WI, use must be voluntary. In WI, "under the influence" does not apply; or
6. except in VA, gunshot wounds that are intentionally self-inflicted or gunshot wounds unless unintentionally inflicted by other than the covered person. In IA, GA and NC, gunshot wounds that are intentionally self-inflicted are not covered; or
7. except in VA, use of alcohol or other intoxicant (in ND, intoxication; in MT, voluntary use) or under the influence of alcohol or other intoxicant regardless of whether such use or influence contributed to the injury (in MO, unless taken as prescribed by a physician). "Under the influence of alcohol or other intoxicant" is defined and determined by the laws and jurisdiction of the geographical area where the accident or loss occurred. In IL and ND, "regardless of whether such use or influence contributed to the injury" does not apply. In MD, loss sustained or contracted in consequence of the Covered Person's being intoxicated or under the influence of any narcotic, unless administered on the advice of a Physician. In MN, bodily injuries received while the covered person was operating a motor vehicle under the influence of alcohol as evidence by a blood alcohol level in excess of the state legal intoxication

- limit are not covered. In WI, the voluntary use of alcohol or other intoxicant regardless of whether such use contributed to the injury is not covered. In GA, intoxication or under the influence of alcohol or any narcotic unless administered on the advice of a physician is not covered. In NH, use of alcohol or other intoxicant or being intoxicated regardless of whether such use or intoxication contributed to the injury is not covered. In NH, intoxicated is defined and determined by the laws and jurisdiction of the geographical area where the accident or loss occurred; or
8. except in IA and VA, riding in or driving a vehicle in a (in GA, an organized race; in MN, driving a vehicle in any organized) race, stunt show, or speed test, participating in a rodeo, mountaineering, underwater diving, hang gliding, sky diving, boxing, wrestling, or participating or engaging in professional sports. In NH, mountaineering, underwater diving, hang gliding, sky diving, boxing and wrestling does not apply; or
9. commission of, or attempt to commit a felony, inciting or attempting to incite a riot or insurrection, or engagement or involvement in an illegal occupation. In WI, "engagement or involvement in an illegal occupation" does not apply. In MD, we will not pay benefits for the Covered Person's commission of or attempt to commit a felony; or
10. war, whether declared or undeclared, or injury incurred while in the military. In VA, upon receipt of written notice of military service, premiums will be refunded on a pro-rata basis and coverage will be suspended until military service is over; or
11. flight or travel in, or descent from any flight where a covered person was a pilot or crew member or where the aircraft is used for training or military purpose; or
12. except in PA and VA, overuse syndrome or any injury as a result of repetitive action.

In MD only, we will not pay any claim, bill, or other demand or request for payment for health care services that the appropriate regulatory board determines were provided as a result of a Prohibited Referral

In MD only, in no event will any benefits covered under the Policy be reduced by any Automobile "No Fault" insurance.

The Policy does not provide benefits for loss or losses due to Pre-Existing Conditions that are incurred during the 12 months immediately prior to the Effective Date. In addition, a disability or loss caused by a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (in MD, and) (2) we have specifically excluded the Pre-Existing Condition by name or specific description. However, a claim for a Pre-Existing Condition incurred after 2 years (in CO, 1 year; in MT, VA and WV, 12 months) from the Effective Date will be covered, unless that condition is excluded by name or specific description effective on the date of loss. In MT, number (1) does not apply.

10-DAY RIGHT TO EXAMINE POLICY - You have ten (10) days to examine the policy and have your premiums refunded.

Protector I Policy Form Number: AC02-A (including state variations),
 AC02-A-LA, AC02-AMT, AC02-A-TX
 Protector II Policy Form Number: AC02-B (including state variations),
 AC02-B-LA, AC02-BMT, AC02-B-TX



Call 972-821-9913

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