

A. POLICY SPECIFICATIONS

GROUP POLICY NUMBER : 68000559

NAME OF CREDITOR : CIMB BANK PHILIPPINES INC.

POLICY EFFECTIVE DATE : April 01, 2022

MODE OF PAYMENT : Monthly

BENEFITS : Death

PREMIUM RATES : Premiums are paid annually based on the attained age and the outstanding balance at the beginning of the year.

Case	Monthly Rate*
All Borrowers	Life - 3.18

*per thousand of outstanding balance

Premium rates are exclusive of documentary stamp taxes and other taxes payable.

ELIGIBILITY CONDITIONS : All Debtors of the above Creditor who are at least 18 years of age and who have not attained their 65th birthday anniversaries on the date of inception of Indebtedness.

DECLARATION OF GOOD HEALTH AND INSURABILITY LIMIT : As determined by the Company

NON-MEDICAL LIMIT : As determined by the Company

NO EVIDENCE LIMIT : As determined by the Company

MINIMUM NEW DEBTORS PER POLICY YEAR : As determined by the Company

TERMINATION AGE : 65 years old

EXPERIENCE REFUND : None

AMOUNT OF INSURANCE : As stated in the Certificate of Cover

MAXIMUM LIMIT PER LIFE : As determined by the Company

CONTRIBUTORY/NON- CONTRIBUTORY : As determined by the Company

PARTICIPATING/NON- PARTICIPATING : As determined by the Company

PARTICIPATION REQUIREMENT : As determined by the Company

Documentary stamps have been affixed and will be correspondingly affixed thereafter and properly cancelled in the Company's weekly master list of policies issued.

PART I: GENERAL PROVISIONS

The Entire Contract

This Policy, any riders or endorsements therein, any amendments thereto signed by both parties, the application of the Creditor, a copy of which is attached hereto and made a part hereof, and the individual applications, if any, of the Borrowers insured shall constitute the entire contract. All statements made by the Creditor or by the individual Borrowers shall, in the absence of fraud, be deemed representations and not warranties, and no statements made by the Creditor or any Borrower or on their behalf shall be used in defense to a claim under this Policy, unless it is contained in a written application signed by the Borrower and a copy of that application is or has been furnished to him or to his beneficiary.

No agent is authorized to make or modify this Policy, to extend the time for payment of premium, to waive any lapse or forfeiture, to waive any of the Insurer's rights or requirements or to bind the Insurer, by making any promise or by accepting any representation or information not contained in the contract.

Only the President, Executive Vice President or a duly authorized Officer of the Insurer has the power in its behalf to issue permits or modify this Policy, or to extend the time for making any premium payment thereon. The Insurer shall not be bound by any promise or representation thereto or hereafter given by any Borrower other than any one of the above-mentioned officials, and by him only in writing.

This Policy may at any time be amended and changed by written agreement between the Insurer and the Creditor. Any such amendment shall be binding on all Borrowers insured under the Policy whether they became insured prior to or on or after the effectivity date of the amendment.

Incontestability

The validity of this Policy shall not be contested, except for the nonpayment of premiums, after it has been in force for two (2) years from its Policy Effectivity Date or from its date of reinstatement. Similarly, the validity of the insurance on any covered Borrower or any additional portion thereof, which becomes effective on or after the Policy Effectivity Date, shall not be contested, except for the nonpayment of premiums, after such Borrower's insurance has been in force hereunder during his lifetime for a period of two (2) years from its effectivity or reinstatement date.

Suicide

In case of death of the insured Borrower by suicide or self-destruction within two (2) years from the Policy Effectivity Date or the date of approval of last reinstatement, if any, the then provisions of the Insurance Code, as amended shall apply. Where the suicide is not compensable, the liability of the Insurer is limited to the refund of the premiums received by the Insurer under this Policy.

Data Required

The Creditor shall furnish promptly in writing on forms satisfactory to the Insurer all notices and information required for the efficient administration of the insurance under the Policy, including (1) notice of all Borrowers becoming insured together with information as to each necessary to determine the age, amount of insurance, effective date of insurance and name and relationship of the beneficiary, if any; (2) the name and termination date of each insured Borrower whose insurance terminates, except in the case of the termination of the Policy or termination of insurance with respect to a Sub-Group, if any; and (3) notice of changes in the insurance classification of insured Borrowers. All documents furnished to the Creditor by a Borrower in connection with his insurance and such other records as may have a bearing on the insurance under the Policy, shall be open for inspection by the Company at all reasonable times. The

Creditor shall maintain a record of the insured Borrowers containing for each such Borrower the essential particulars of the insurance.

Clerical Error

Clerical errors in keeping the records shall not invalidate insurance otherwise validly in force nor continue insurance otherwise validly terminated. If the age or date of birth or other relevant facts relating to an insured Borrower shall be found to have been misstated and if such misstatement affects the amount of insurance or has anything to do with the terms and conditions of the Policy, the true age and facts shall be used in determining whether insurance is in force under the terms of the Policy and in what amount, and an equitable adjustment of premiums shall be made.

Premiums and Renewal

The initial premium for each benefit provided in the Policy shall be as stated in the Premium Rate provision applicable to said benefit, and shall apply for the first policy year of said benefit. The Policy may be renewed at the end of the term of the Policy by payment of the required premiums when due, provided that the number of Borrowers then insured is not less than that provided under the Minimum Participation Requirement provision herein.

The premium due on any premium due date for the premium period commencing with such due date and ending with the next succeeding due date shall be the aggregate of the premiums for all benefits insured by the Policy in force at the beginning of such premium period. Premiums are payable by the Creditor to the Head Office of the Insurer, or to a duly authorized agent of the Insurer.

Premium adjustments shall be made as mutually agreed upon by the Creditor and the Insurer. Premium adjustments involving a return of unearned premiums to the Creditor shall be limited to the period of twelve (12) months immediately preceding the date of receipt by the Insurer of evidence that such adjustments should be made.

Grace Period

A grace period of thirty-one (31) days, without interest, will be allowed for the payment of every premium after the first during which period this Policy shall continue in force, except that if the Creditor shall give the Insurer written notice in advance of an earlier date of termination, then this Policy shall terminate on such earlier date. The Creditor shall be liable to the Insurer for the payment of the pro-rata premium for the time this Policy or insurance coverage was in force during the grace period.

Individual Certificate

The Insurer will issue to the Creditor, for delivery to each insured Borrower a Certificate of Insurance setting forth a summary of the essential features of the insurance coverage and other privileges to which such Borrower is entitled and stating to whom the benefits are payable. Such certificate and the corresponding benefits will not constitute a contract between the Insurer and Borrower.

Currency

All amounts of money in this Policy are in the legal currency of the Philippines.

The provision of Article 1250 of the Civil Code of the Philippines (RA No. 386) which reads

“In case an extraordinary inflation or deflation of the currency stipulated should supervene, the value of the currency at the time of establishment of the obligation shall be the basis of payment.”

is understood and agreed not to apply in determining the extent of any liability of the Insurer in this Policy.

Proof of Claim

Written proof of claim herein referred to must be submitted to the Insurer at its Head Office or through other offices as the Insurer may hereafter designate in writing within ninety (90) days after the date of the loss for which claim is made. Failure to submit written proof of claim within such time shall not invalidate or reduce any claim if it can be shown that it was not reasonably possible to submit such proof within the required time and that proof was submitted as soon as reasonably possible.

Payment of Claim

All benefits that may be provided under this Policy shall be paid after receipt of due proof of loss. Indemnity for death of the insured Borrower is payable to the person(s) entitled to receive the death benefit under the Insuring Clause in Part III. All other benefits under this Policy, if any, are payable to the insured Borrower.

Examinations

The Insurer shall have the right and opportunity to examine, through its medical examiners, the insured Borrower when and so often as it may reasonably require during the pendency of a claim, and also the right and opportunity to make an autopsy in case of death where it is not forbidden by law.

Legal Proceedings

Unless the claim has been rejected, no action at law or in equity shall be brought to recover on the Policy prior to the expiration of sixty (60) days after proof of claim has been filed in accordance with the requirements of the Policy, nor shall such action be brought at all unless brought within two (2) years from the expiration of the time within which proof of claim is required by the Policy.

Reinstatement

If a Borrower whose insurance was terminated in accordance with the "Termination of Insurance" provision elects to resume payment of the premiums to be collected by the Insurer for insurance, such Borrower may, with the Creditor's consent, again become insured under the Policy by furnishing without expense to the Insurer, evidence of insurability satisfactory to it. If such evidence is submitted, the Borrower shall become insured with respect to such indebtedness on the date the Insurer determines the evidence to be satisfactory, provided that on such date no payment on the indebtedness is more than one (1) month overdue.

Non-waiver of Policy Provision

Failure of the Insurer to insist upon compliance with any provision of this Policy at any given time or under any given set of circumstances shall not operate to waive or modify such provision, or in any manner whatsoever to render it unenforceable, as to any other time or as to any other occurrence, whether the circumstances are, or are not, the same.

Misstatement of Age

The Insurer reserves the right to require proof of age of the insured Borrower before paying any claim under this Policy. If the age of an insured Borrower has been incorrectly stated, the amount payable under this Policy shall be the amount which the premium paid could have purchased at the correct age according to the premium rates in effect on the premium due date. However, in the event that the age of the Insured has been misstated and according to the correct age of the Insured, the coverage provided by this Policy would not have become

effective, or would have ceased prior to the acceptance of his premium or premiums, then the liability of the Insurer during the period the Insured is not eligible for coverage shall be limited to the refund of all the premiums paid for the period not covered by the Policy.

Policy Words and Phrases

"Insurance Age" shall mean that age of an insured Borrower on his last birthday.

The masculine pronoun whenever used in this Policy shall include the feminine and the singular shall include the plural unless the context indicates a different meaning.

The effective time with respect to any dates referred to in the Policy shall be 12:01 A.M. standard time at the address of the Creditor.

PART II: INSURING PROVISIONS APPLICABLE TO BORROWERS

Definition of a Borrower

"Borrower" as used in the Policy means any Borrower who is eligible, enrolled and insured for the insurance benefits provided for Borrowers under this Policy.

"Insured" shall be deemed to include the term "Borrower".

Eligibility

Who May Be Insured.

All borrowers of the Policyholder who are in good health, performing the daily normal activities of his life and whose insurance ages are at least eighteen (18) but not more than sixty-five (65) years old.

Classification of Eligible Borrowers	Eligibility Date
All Borrowers	The date of loan release provided evidence of insurability is satisfactory to the insurer.

For every loan transaction, only one person shall be eligible for insurance under this Policy. Therefore, where an instrument of indebtedness is jointly and severally signed by two or more persons, only the principal Borrower shall be considered eligible, except in instances where the Creditor requires that all named Borrowers must be insured. In such cases, the maximum liability of the Insurer shall in no case exceed the amount of insurance as appearing in the Certificate of Group Creditor Life Insurance of any one insured Borrower.

Minimum Participation Requirement. Participation of one hundred percent (100%) future Borrowers and at least seventy-five percent (75%) eligible Borrowers during the first policy year and at any one time thereafter shall be required in order to establish and continue this Policy. The Insurer reserves the right to terminate this Policy if the minimum participation requirement is not fulfilled at any one time.

Exclusions

The following are not included:

Persons below eighteen (18) years and those who have attained the age of sixty-five (65).

Enrollment

Written enrollment, on forms satisfactory to the Insurer, is required for each eligible Borrower in respect of whom an application for insurance under this Policy is being made. It shall be submitted to the Insurer through the Creditor within sixty (60) days from his eligibility date.

Effectivity Date of a Borrower's Insurance

An eligible Borrower for whom insurance is provided, may become insured only by filing with the Creditor written application for insurance in a form furnished by the Insurer for that purpose, and if required by the Insurer, by furnishing evidence of his insurability satisfactory to the Insurer and without expense to it.

Subject to the Effective Date Proviso below the insurance for an enrolled Borrower shall become effective on the applicable date set forth below:

Classification of Eligible Borrowers	Effectivity Date
All Borrowers	The date of loan release or the date of approval by the Insurer at its Office of evidence of his insurability, whichever is later.

However, the insurance of any eligible Borrower who is required to submit evidence of insurability as provided for in the "Evidence of Insurability" provision, shall take effect only on the date such evidence of insurability is approved by the Insurer, in so far as such amount of insurance is concerned.

Notwithstanding these provisions, however, no Borrower shall be insured under this Policy unless the first premium due for his coverage shall have been paid.

Effective Date Proviso

Any eligible Borrower, who on account of illness or disability is bedridden or confined in a hospital/clinic on the date his insurance would normally take effect as provided above, shall not be considered insured on such date. His insurance shall take effect only on the first day of the month coincident with or immediately following his full recovery from such illness or disability or his discharge from the hospital/clinic as a fully recovered patient.

Contributions from Borrowers

The amount collected by the Creditor from the Borrower for such insurance shall not exceed the aggregate of the premiums charged by the Insurer.

If any part of the loan is paid prior to its scheduled maturity date, the Insurer shall refund to the Creditor an amount, if any, equal to the unused premium of the paid portion of the loan. The Creditor shall promptly refund the corresponding amount to the Borrower.

Evidence of Insurability

The following shall be required to submit evidence of insurability satisfactory to the Insurer:

- (a) Any Borrower whose insurance age on his eligibility is over sixty-four (64) years old on his eligibility date.
- (b) Any Borrower whose insurance age is sixty-four (64) years or below on his eligibility date and whose amount of insurance exceeds one million pesos (PhP 1,000,000).
- (c) Any Borrower, irrespective of age and amount of insurance, whose application for insurance is submitted to and received by the Insurer after sixty (60) days from his eligibility date.
- (d) All Borrowers if less than seventy-five percent (75%) of the eligible Borrowers have made application for insurance.

The insurance of an individual required to submit evidence of insurability shall take effect on the date such evidence is approved by the Insurer subject, however, to the conditions stated herein.

Depending on the evaluation of the medical findings, the Insurer shall have the right to:

- (a) Increase the premium rate for the amount of insurance subject to medical examination if the Borrower is found substandard;
- (b) Decline the Borrower if found uninsurable.

Termination of Insurance

This Policy and the insurance of all Borrowers shall automatically terminate on the earliest of the following dates:

Termination of the Policy

- 1. The date the premium falls due if written notice that this Policy will not be renewed is given the Insurer by the Creditor on or before said due date;
- 2. The date of receipt by the Insurer of the Creditor's written notice to terminate this Policy, if such notice is given during the grace period;
- 3. The date next following the end of the grace period if the premium is not paid; or
- 4. The date of receipt by the Creditor of the Insurer's written notice of termination when the number of Borrowers insured hereunder falls below the minimum participation requirement.

Termination of Individual Insurance

- 1. The date this Policy terminates;
- 2. The date the Borrower attained his sixty-fifth (65th) birthday;
- 3. The date the term of the individual insurance of the insured Borrower expires;
- 4. The date he enters into any military service either ground, naval, or air service or any non-combatant unit auxiliary to said military service of any country at war whether or not such was declared;
- 5. The date his loan transaction is fully paid through refinancing and renewal or by other means;
- 6. The date his loan transaction is transferred to another Borrower;
- 7. The date of foreclosure of property mortgaged;
- 8. The date ownership of such indebtedness is transferred to another creditor;
- 9. The date of the expiration of the last period for which the Borrower has paid any charges for insurance.

Termination of this Policy or of individual insurance for any cause shall be without prejudice to any claim arising prior to the effective date of termination.

The Insurer will pay the Creditor the corresponding unused premium less any indebtedness, if there is any, upon termination of this Policy or of the Borrower's individual insurance. The Creditor shall promptly refund the corresponding amount to the Borrower.

In case of the termination of this Policy, the Insurer shall send a notice of termination or cancellation that shall contain an advice to the Creditor to inform the Borrower with active coverage of the termination of this Policy.

PART III: LIFE INSURANCE BENEFITS PROVISION

Insuring Clause

Upon receipt by the Insurer of due proof of the death of an insured Borrower, the Insurer shall pay the applicable amount of Life Insurance as determined by the Certificate of Group Creditor Life Insurance to the insured Borrower's Creditor and the excess of which to the beneficiary, if surviving the insured Borrower, or if there is no beneficiary surviving at the death of the insured Borrower, to the first surviving class of the following classes of successive preference beneficiaries: the insured Borrower's (a) widow or widower; (b) surviving legitimate, illegitimate or legally adopted children; (c) surviving parents; (d) surviving brothers and sisters; (e) executors or administrators. A notarized affidavit, signed by any individual belonging to the first surviving class of successive preference beneficiaries described in items (b), (c) or (d) above, stating the names and addresses of the beneficiaries belonging to such class, shall be sufficient proof to the Insurer that the beneficiaries or beneficiaries so named therein are the sole survivors of such class.

If there be two or more beneficiaries entitled to the proceeds in the same class, the proceeds shall be shared equally.

If any beneficiary is a minor or physically, mentally or otherwise incapable of giving a valid release for any payment due, the Insurer may, at its option, and until claim is made by the duly appointed guardian or committee for such beneficiary, make payment to any person or institution who appears to the Insurer to have assumed responsibility for the care, custody or support of such beneficiary. Such optional method of settlement previously elected or in the absence of such optional method of settlement, shall be made in installments not in excess of 1/12 of the remaining amount until the remaining amount is fully discharged.

Beneficiary

The Creditor shall be the sole and irrevocable beneficiary of each Borrower insured hereunder to the extent of the unpaid balance of the insured Borrower's indebtedness with the Creditor at the time of the Borrower's death. Each insured Borrower shall also have the right to designate his beneficiary/ies, not disqualified by law, to whom the proceeds in excess of the indebted amount under this Policy shall be payable.

Settlement of Insurance Proceeds

Upon receipt and acceptance by the Insurer of due proof that a covered Borrower died while insured, for which benefits are payable, the Insurer will pay the Creditor, being the sole and irrevocable beneficiary, the insurance amount equivalent to the unpaid balance of the insured Borrower's indebtedness with the Creditor. Any amount so paid shall be applied by the Creditor toward the payment of the unpaid balance of the Borrower's indebtedness with the Creditor. Any amount of insurance in excess of the unpaid balance of the Borrower's indebtedness with the Creditor shall be paid to the Borrower's beneficiary/ies as designated in his individual application. Payment by the Insurer to the Creditor and the Borrower's beneficiary/ies shall completely discharge the Insurer's liability with respect to the amounts so paid.

**GROUP TOTAL AND PERMANENT DISABILITY (TPD)
BENEFIT RIDER**

Insuring Clause. Upon receipt and approval by the Insurer of due proof that the Insured becomes totally and permanently disabled as hereinafter defined, the Insurer, subject to the limitations and provisions of the Policy and this rider, shall pay the amount specified in the Insurance Schedule of this rider, provided:

- (a) The Insured is totally and permanently disabled before reaching his sixty-sixth (66th) birthday and prior to the date his insurance is terminated in accordance with the Termination of Individual Insurance provisions of the Policy or of this rider;
- (b) The Insurer received the written notice of such disability not more than one (1) year after the premium payment on account of the Member had been discontinued;
- (b) The Insured has been terminated from employment because of his total and permanent disability;
- (c) The disability is not the result of injury or disease while the Insured is serving in the military, naval and air service or in any non-combatant unit auxiliary to said military, naval or air service of any country at war, whether such war be declared or undeclared, and said disability thus caused does not occur during the period of such service or within six (6) months after the termination of such service; and
- (d) The Insured has not converted his group insurance under any conversion option of the Policy to which this rider is attached.

Definition. "Total and permanent disability" shall mean disability resulting from bodily injury due to accident or disease when the Insured is wholly prevented from engaging in any business or occupation or performing any physical or mental work, for compensation, profit or gain, and when such disability is present and has existed continuously for not less than six (6) consecutive months. Total disability during its continuance shall be presumed to be permanent if it is reasonably certain that such disability will continue during the remaining lifetime of the Insured.

The word "disability", whenever it hereafter appears, means total and permanent disability as above defined and limited.

Insurance Schedule

Classification	Amount of Insurance
All Borrowers	Refer to the Endorsement

Premiums. This rider contract is issued in consideration of the application therefor and of the payment in advance of an additional premium as follows:

Classification	Monthly Premium per Thousand of Amount of Insurance
All Borrowers	P0.37

This additional premium shall be payable in the same manner and at the same time as the premium of the Policy to which this rider is attached.

Notwithstanding the foregoing provisions only those individuals who are sixty-five (65) years old and below at the time their coverage takes effect is eligible for insurance.

The Insurer reserves the right to establish, at the end of any policy year or whenever the terms of the said Policy are changed, new premium rate at which subsequent premiums for this rider shall be determined.

Exclusions. Disability benefits herein shall not be paid if disability results from any of the following:

- (a) pregnancy, childbirth, abortion, or miscarriage or complications thereof;
- (b) psychiatric disorders, drug or alcohol abuse;
- (c) injuries or illness due to military service or suffered under conditions of war, whether declared or not, insurrection, rebellion, or mutiny;
- (d) intentional self-inflicted injuries or illness, caused by attempts at suicide, or incurred as a result of or while participating in the commission of a crime;
- (e) engaging or taking part in driving or riding in any kind of race, professional sports or hazardous sports, underwater activities involving the use of breathing apparatus, flying or aerial activities other than as a fare-paying passenger, or
- (f) AIDS or AIDS-related complex.

Notice of Total and Permanent Disability. Written notice of total and permanent disability upon which claim shall be based must be given to the Insurer at its Office or through a duly authorized agent within one (1) year after the premium payment on account of the Member had been discontinued. Failure to give notice within such time shall not invalidate or reduce any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

The Insurer, upon receipt of such notice of injury, will provide forms for filing proof of claim. If such forms are not provided within thirty-one (31) days after the receipt of notice of disability, the claimant shall be deemed to have complied with the requirements of these rider provisions as to proof of claim upon submitting, within the time fixed in this rider provision after the date of the loss for which claim is made, written proof covering the occurrence, character and extent of the loss for which claim is made.

Proof of Claim. Affirmative proof that the Insured has become totally and permanently disabled as above defined must be submitted on forms furnished by the Insurer upon request of the Insured within ninety (90) days after receipt of such forms from the Insurer. Failure to submit written proof of claim within such time shall not invalidate or reduce any claim if it can be shown that it was not reasonably possible to submit such proof within the required time and that proof was submitted as soon as reasonably possible.

Payment of Claim. All indemnities provided in this rider contract shall be paid immediately after receipt of the due proof of loss. Indemnity for loss of life of the Insured Member is payable to the person or persons entitled to receive the death benefit under the Group Master Policy to which this rider contract is attached. All other indemnities under this rider contract are payable to the Insured person.

Examinations. The Insurer shall have the right and opportunity to examine, through its medical examiners, the person of the Insured when and so often as to may reasonably require during the pendency of claim.

Legal Proceedings. Unless the claim has been rejected, no action at law or in equity shall be brought to recover on this rider contract prior to the expiration of sixty (60) days after the proof

of loss has been filed in accordance with the requirements of this rider contract. Neither shall such action be brought at all unless brought within two (2) years from the expiration of the time within which proof of loss is required by the rider contract.

Termination of Insurance. Coverage of an Insured Member under this TPD rider shall automatically terminate on:

- (a) The date the Group Master Policy to which the TPD rider is attached is terminated;
- (b) The date the rider itself is terminated;
- (c) The date the premium therefor is not paid when due or within the grace period;
- (d) The end of the policy year during which the Member attains the age of sixty-six (66) years;
- (e) The date the Insured ceases to be eligible for insurance in any class of members under the Policy;
- (f) the date the employment, if an employee, with the Policyholder ceases. Cessation of active work by an Insured shall be deemed to constitute termination of his employment, except for such limited period as may be prescribed by the Policy; or
- (g) The date the Insured engages in military, aeronautical or naval service in time of declared or undeclared war.

Termination of this rider contract by the Policyholder or by the Insurer shall be without prejudice to any claim arising prior to such termination.

Whenever this rider contract shall be terminated, the additional premium therefor shall no longer be payable and there shall be no value on account therefor except for the return of the unearned portion, if any, of such premium paid which covered the period during which termination became effective, together with any additional premiums paid which fall due after termination.

The subsequent payment or acceptance of any premium shall not create any liability other than refund of such premium, unless this rider is reinstated.

Either the Insurer or the Policyholder may terminate this rider as of any policy anniversary by giving written notice at least thirty-one (31) days prior to such policy anniversary (subject however, to prior termination by default); such termination to be effective as of the premium due date next succeeding the expiration of the thirty-one (31) days following the mailing by the Insurer of the written notice of termination to the Policyholder unless this rider contract shall terminate sooner by default.

Effectivity. This rider is made a part of the Policy and becomes effective on the Policy Date stated in the Certificate of Master Group Life Insurance.

The conditions and provisions appearing on this page and the preceding pages shall apply only to this rider and not to any other portion of the Group Policy Contract to which this rider is attached, and all of the provisions of the Policy to which this rider is attached shall apply to this rider, unless specifically provided otherwise.

IMPORTANT NOTICE

1. Careful reading of this Policy should be done. Should there be any necessary corrections, this Policy must be returned immediately to the Office of the Insurer at the following address

PRU LIFE INSURANCE CORPORATION OF U.K.

9/F Uptown Place Tower 1, 1 East 11th Drive
Uptown Bonifacio, 1634 Taguig City, Metro Manila, Philippines

Office trunkline: (632) 8683 9000/(632) 8884 8484

Customer helpdesk: (632) 8887 LIFE within Metro Manila,
1 800 10 PRULINK domestic toll-free

E-mail: contact.us@prulifeuk.com.ph

Website: www.prulifeuk.com.ph

2. The Insurance Commission, with offices in Manila, Cebu and Davao, is the government office in charge of the enforcement of all laws related to insurance and has supervision over insurance providers and intermediaries. It is ready at all times to assist the general public in matters pertaining to insurance. For any inquiries or complaints, please contact the Public Assistance and Mediation Division (PAMD) at the Insurance Commission at 1071 United Nations Avenue, Manila with the telephone numbers +632-5238461 to 70 and email address publicassistance@insurance.gov.ph. The official website of the Insurance Commission is www.insurance.gov.ph