# ATTACHING TO AND FORMING PART OF: ARS-03-0008184

**ISSUED TO: Peasland Thomas** 

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Cholesterol, Atherosclerosis, an treatment of,	
operation, diagnostic procedure or any other	
conditions related to elevated cholesterol,	36 months
chest pain, heart attack, stroke, and plaque	
deposits, and any complications thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
X	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

Χ	
Carlos M. Robinson	
President	

# ATTACHING TO AND FORMING PART OF: ARS-03-0008184

**ISSUED TO: Peasland Thomas** 

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Migraines, including operation or treatment for or complications thereof.	36 months

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
x (SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)



### ATTACHING TO AND FORMING PART OF: ARS-03-0008184

ISSUED TO: Peasland Sandra Jean

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Hypertension, elevated blood pressure, any	
treatment of, operation, diagnostic	
procedure or any other conditions related to	48 months
hypertension, high blood pressure,	
circulatory and any complications thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
x (SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

Χ	
Carlos M. Robinson	
President	

### ATTACHING TO AND FORMING PART OF: ARS-03-0008184

ISSUED TO: Peasland Sandra Jean

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Breasts, any disease or disorder of the breasts including metastases, and any operation or treatment for or complications thereof.	48 months

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
X	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

