

This Declaration Page is attached to and forms part of the Evidence of Insurance provisions:
SLC-3 (USA) NMA2868 (24/08/00)

I. Name and address Of the Master Policyholder:	The Beacon/Axis Series Group Insurance Trust C/O Lutea (Anguilla) Limited P.O. Box 1533, The Valley, TV1 13P British West Indies
Name of Members:	Olson Timothy Stephen (691802046178) Olson Heidi Elizabeth (691802046179) Olson Luke Sven (691802046180) Olson Emily Jade (691802046181)
Members Address:	930 N Tabor Ct Castle Rock Colorado United States 80104
Mail Forwarding Address of Members:	930 N Tabor Ct Castle Rock Colorado United States 80816
II. Effective date of Coverage:	March 16, 2020 to March 15, 2021 (Coverage and Benefits will terminate at 11:59 PM, EST)
III. Insurance is effective with certain Percentage	UNDERWRITERS AT LLOYD'S, LONDON 100%
IV. Amount: Coverage: Deductible: Premium: Conditional Rate Increase: Smoking Rider Rate Increase: Ultimate Sports Rider: Rate: Due Dates/Amounts:	As set forth in Section 24, Schedule of Benefits and Limits MERIDIAN ESSENTIAL \$ 1,000.00 \$ 2,643.60 Heidi by 20% N/A No \$ 2,643.60 March 16, 2020 / \$ 2,643.60
V. Special conditions/Forms Attached:	SLC-3 (USA) NMA2868 (24/08/00); DECLARATION PAGE; FORM MSE-01 (PAGES 1-32); EXHIBIT A - APPLICATION; RIDERS- 1

VI. Service of Suit may be made upon: Drinker Biddle & Reath LLP

