



Outline of Current Plan	
<b>Policyholder Name</b>	Robert Half International, Inc. 2613 Camino Ramon San Ramon, CA 94583
<b>Insurance Company</b>	Federal Insurance Company (Chubb)
<b>Policy Number</b>	6477-61-03
<b>Policy Term</b>	January 1, 2017 – January 1, 2020
<b>Premium</b>	\$100,170.00 paid in 3 equal annual installments of \$33,390.00 per year
<b>Commission</b>	At present the commission is 0% at renewal it will change to 20%
<b>Insured Persons</b>	
<b>Class 1</b>	All active full-time employees of the Policyholder earning less than \$35,000 in salary.
<b>Class 2</b>	All active full-time employees of the Policyholder earning between \$35,000 and \$74,999 in salary.
<b>Class 3</b>	All active full-time employees of the Policyholder earning between \$75,000 and \$124,999 in salary.
<b>Class 4</b>	All active full-time employees of the Policyholder earning between \$125,000 and \$174,999. in salary.
<b>Class 5</b>	All active full-time employees of the Policyholder earning between \$175,000 or more in salary.
<b>Class 6</b>	The Spouse/Domestic Partner of a primary insured person.
<b>Class 7</b>	The Dependent Child(ren) of a Primary insured person.
<b>Principal Sum</b>	
<b>Class 1</b>	\$ 50,000
<b>Class 2</b>	\$100,000
<b>Class 3</b>	\$200,000
<b>Class 4</b>	\$300,000
<b>Class 5</b>	\$500,000
<b>Class 6</b>	\$ 25,000
<b>Class 7</b>	\$ 10,000

Services provided by Mercer Health & Benefits LLC.

<b>Hazard</b>	
<b>All Classes 1-5</b>	Business Travel Only Coverage - 180 days will change at renewal to 365 days Hijacking or Skyjacking Extraordinary Commutation Bomb
<b>Class 6 &amp; 7</b>	Business Travel Family
<b>Aggregate</b>	\$3,000,000 per Aircraft Accident
<b>Benefits</b>	<ul style="list-style-type: none"> <li>• Accidental Death</li> <li>• Accidental Dismemberment and Paralysis Benefits</li> </ul>
<b>Additional Benefits</b> <b>Classes 1-7</b>	<ul style="list-style-type: none"> <li>• Coma – 1% of the principal sum to a maximum benefit amount 100% of the principal Sum;</li> <li>• Critical Burn Expense – 50% of the principal sum to a maximum benefit amount of \$100,000;</li> <li>• Full Coverage for over age 70 Insured's;</li> <li>• Loss of Use Benefit – provides a percentage of the principal sum depending on the severity of the loss;</li> <li>• Newly Acquired Corporations Coverage – <ul style="list-style-type: none"> <li>○ coverage will be extended automatically for newly acquired corporations when the acquisitions results in less than 10% increase in total employees in any one calendar year.</li> <li>○ When acquisitions result in an increase in total employees of 10% or more in any one calendar year, the policyholder must provide the name of the newly acquired company and all underwriting data requested to enable the company to determine any additional premium required;</li> </ul> </li> <li>• Paralysis Benefit – provides a percentage of the principal sum depending on the severity of the loss;</li> <li>• Psychological Therapy – 2% of the principal Sum to a maximum benefit amount of \$10,000;</li> <li>• Rehabilitation Expense – 2 of the principal sum to a maximum benefit amount of \$10,000;</li> <li>• Seat Belt and Occupant Protection Device Benefit for Seat Belt is 10% of the Principal Sum Benefit for occupant Protection Device is 10% of the Principal Sum Maximum Benefit Amount for Seat Belt and occupant protection Device is 20% of the Principal Sum to a maximum of \$50,000.</li> <li>• Sojourn and Personal Deviation Coverage – extends coverage during an activity that is not reasonably related to the business of the policyholder and not incidental to a bonafide trip (maximum of 3 days);</li> </ul>
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<p><b>General Exclusions</b></p> <p>The exclusions apply to all benefits or Hazards under the policy. Additional exclusions, limitations or conditions may also apply to specific benefits or Hazards.</p>	<p>§ <b>Owned Aircraft, Leased Aircraft or Operated Aircraft</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person being in, entering, or exiting any aircraft:</p> <ul style="list-style-type: none"> <li>– owned, leased or operated by the Policyholder or on the Policyholder’s behalf; or</li> <li>– operated by an employee of the Policyholder on the Policyholder’s behalf.</li> </ul> <p>§ <b>Aircraft Pilot or Crew</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person entering, or exiting any aircraft while acting or training as a pilot or Crew member. This exclusion does not apply to passengers who temporarily perform pilot or crew functions in a life-threatening emergency.</p> <p>§ <b>Disease or Illness</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person’s emotional trauma, mental or physical illness, disease, pregnancy, childbirth or miscarriage, bacterial or viral infection, bodily malfunctions or medical or surgical treatment thereof. This exclusion does not apply to an Insured Person’s bacterial infection caused by an Accident or by Accidental consumption of a substance contaminated by bacteria.</p> <p>§ <b>Incarceration</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly any occurrence while an Insured Person is incarcerated after conviction.</p> <p>§ <b>Service in the Armed Forces</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person participating in military action while in active military service with the armed forces of any country or established international authority.</p> <p>§ <b>Specialized Aviation</b> - This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person traveling or flying on any aircraft engaged in Specialized Aviation Activities.</p> <p>§ <b>Suicide or Intentional Injury</b> – This insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, an Insured Person’s suicide, attempted suicide or intentionally self-inflicted injury.</p> <p>§ <b>Trade Sanctions</b> - This insurance does not apply to any accident when: the U.S. has imposed any trade or economic sanctions prohibiting insurance; or there is any other legal prohibition against providing insurance.</p>
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<b>BENEFICIARY PAYMENT</b>	<p>The Benefit Amount for covered Loss of Life will be paid to the beneficiary designated by an Insured Person in writing and on file with the policyholder. Any Benefit Amount payable due to the Loss of Life of a Dependent Child will be paid to the Primary Insured Person, absent any beneficiary designation by the Dependent Child.</p> <p>If an Insured Person has not chosen a beneficiary or if there is no beneficiary alive when the insured person dies, then Chubb will pay the benefit amount for loss of life to the first surviving party in the following order:</p> <ul style="list-style-type: none"><li>· the Insured Person’s Spouse or Domestic Partner;</li><li>· in equal shares to the Insured Person’s surviving children;</li><li>· in equal shares to the Insured Person’s surviving parents;</li><li>· in equal shares to the Insured Person’s surviving brothers and sisters;</li><li>· the Insured Person’s estate.</li></ul> <p>If the Insured Person has named multiple beneficiaries and one or more dies before the Insured person has, their share of the payment will be redistributed proportionately among the surviving beneficiaries.</p> <ul style="list-style-type: none"><li>· <b>Foreign National Facility of Payment</b> Please refer to Policy.</li></ul>
<p><b>Disclaimer:</b> This is “not” a Summary Plan Description. The foregoing summary/report/outline does not take the place of or alter any of the conditions, exclusions, and other terms of the insurance policy herein summarized. It is merely a short descriptive guide to the policies in force, for convenient reference. The policy itself should be reviewed carefully and questions on coverage, claims and all other insurance matters should be referred to your Mercer Health &amp; Benefits contacts.</p>	

March 6, 2017rel