



CALIFORNIA STATE FIREFIGHTERS' EMPLOYEE WELFARE BENEFITS CORPORATION

December 5, 2012

Re: Benefit Plan provided at "No Cost" by means of the CSFEWBC SAFER Grant

Dear Fire Chief,

The insurance branch of CSFA, California State Firefighters' Employee Welfare Benefit Corporation (CSFEWBC) has been fortunate enough to receive a \$2.2 Million Safer Grant. This grant was awarded by the Department of Homeland Security to increase the recruitment and retention of additional Volunteer Emergency Responders. The grant is designed to offer benefits to Volunteer Emergency Responders in the State of California that meet the designated Standards of Performance.

Where most benefit grants are geared toward a certain area or county, this grant encompasses all of the current and/or prospective volunteers in the state. There are \$2.2 million in funds available over the 4 year period of the grant and only a limited number of volunteers can be enrolled. You are strongly encouraged to enroll your own department as soon as possible.

The benefit plan will include up to \$50,000 in Accidental Death and Dismemberment benefit and a \$200 per week disability benefit payable for up to 104 weeks for each Volunteer. There will also be additional coverage for injuries resulting in brain damage, coma, critical burns, (see attached sheet for additional details). These benefits are intended to provide additional protection and peace of mind to those current and prospective volunteers in the event they are injured while volunteering.

It gets better! The benefit enrollment process is simple. Complete the attached roster with some basic information. This roster needs to be updated at least once per year. To be eligible for enrollment, the Volunteer Emergency Responder must be in good standing with the department, respond to at least 25% of the calls or operational activities, and attend 50% of the department training. Enrollment forms are to be returned to CSFEWBC's broker Myers-Stevens & Toohey. Coverage will become effective the first day of the next calendar quarter following receipt of your completed enrollment form. Coverage remains in effect for one year and as noted above, a new updated enrollment form must be completed annually in order for coverage to continue.

**If you have any questions regarding benefits or the completion of the forms call
Myers-Stevens & Toohey at (800)-827-4695.**

CSFEWBC SAFER Grant

Covered Activities: Covered Activities are defined as: 1) who is on duty at a fire, traveling to or returning from a fire, at a drill, or at a test or trial of any firefighting or emergency apparatus; or 2) who is on duty on an emergency call, going to or returning from an emergency call, or 3) who is on duty participating in or attending any regularly approved, or supervised activity of the Policyholder or traveling to and from such activity.

Class of Persons Covered: All active Volunteer Emergency Responders of the Policyholder who are in good standing with the department and who respond to at least 25% of station call or operational activities, and attend 50% of station department training*

*= Grant Benefit Enrollment Form has to be received and accepted by the California State Firefighters' Employee Welfare Benefits Corporation.

\$50,000 AD&D Principal Sum

Accidental Death & Dismemberment

•Loss of Life:	100% of Principal Sum
•Loss of Speech and Loss of Hearing	100% of Principal Sum
•Loss of Speech and one Loss of Hand, Loss of Foot or Loss of Sight of One Eye:	100% of Principal Sum
•Loss of Hearing and one Loss of Hand, Loss of Foot or Loss of Sight of One Eye:	100% of Principal Sum
•Loss of Hands (Both), Loss of Feet (Both), Loss of Sight or a combination of any two of Loss of Hand, Loss of Foot or Loss of Sight of One Eye	100% of Principal Sum
•Loss of Hand, Loss of Foot or Loss of Sight of One Eye (Any one of each)	50% of Principal Sum
•Loss of Speech or Loss of Hearing	50% of Principal Sum
•Loss of Thumb and Index Finger of Same Hand	25% of Principal Sum

Brain Damage

100% of Principal Sum

Coma

1% of Principal Sum per month
Maximum Benefit Amount: 100% of Principal Sum

Critical Burn Expense

25% of Principal Sum
Maximum Benefit Amount: \$15,000

Seatbelt and Occupant Protection Device

20% of Principal Sum
Alternate Benefit Amount: \$2,000
Occupant Protection Device Benefit Amount: 20% of Principal Sum
Maximum Benefit Amount: 40% of Principal Sum up to \$15,000

Temporary Total Disability

Weekly Amount: \$200
Maximum Benefit Period: 104 weeks
Elimination Period: 0 days

Exclusions from Coverage: Disease or Illness; Suicide or Intentional Injury; Incarceration; War; Service in Armed Forces; Specialized Aviation; Owned Aircraft, Leased Aircraft, or Operated Aircraft; Aircraft Pilot or Crew; Intoxication; Narcotic; Trade Sanctions

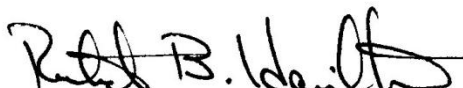
Coverage Underwritten by the stock insurance company Federal Insurance Company, part of the Chubb Group of Insurance Companies. This information is not intended to be a complete description of the insurance coverage available. This policy has exclusion and limitations which may affect any benefits payable.

Any discrepancy between this document and the policy contract, the policy contract will take precedence.

Sincerely,



Samuel J. Winner
President



Robert B. Hamilton
General Manager