

## VOLUNTARY LIFE INSURANCE INTEREST SURVEY

Your employer is considering offering a supplemental group term life insurance plan to all **full-time (20 hours or more per week) employees**. This coverage offers additional protection over and above the basic amount of life insurance provided by your employer. The plan allows you to select the amount of extra coverage - at group rates and through payroll deduction. A minimum of 20% of eligible employees must enroll in order to implement the plan.

To help your employer determine the level of interest in the Voluntary Life plan, we have put together a short employee survey. The plan overview, describing the program currently being considered by your employer, should help you answer any questions you may have. We would appreciate your help by completing the lower half of this form and returning it to:

**(Employer Contact Name)** by **(mm/dd/yyyy)**.

### Key Features of Voluntary Life

- No health questions asked for timely application for amounts of employee coverage up to **[\$50,000]** if minimum participation is achieved.
- Up to **[\$500,000]** of protection, in units of \$10,000.
- Accidental Death and Dismemberment option for employee coverage.
- Family coverage available - up to 1/2 your amount for your spouse;  
up to \$10,000 for your children.
- Coverage continues if you become disabled.
- Accelerated death benefit for terminal illness.
- Portability feature - you can take your coverage with you if you terminate employment.

-----**Interest Survey**-----  
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1. Do you currently have any other life insurance, not provided by your employer? ( ) Yes ( ) No
2. Indicate your earnings level: ( ) < \$20,000 ( ) \$20,000 - \$35,000 ( ) \$35,000 +
3. Indicate your interest level in this program:  
( ) very interested ( ) somewhat interested ( ) not interested
4. If somewhat interested, what key factor would influence your decision?

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