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Western
Mutual
Insurance

An Affiliate of
Western Petroleum
Marketers Association

GROUP BENEFIT ELIGIBILITY CRITERIA

This statement is considered a part of the employer contract with Western Mutual Insurance Company and is incorporated as part of the group application.

The employees of _____ are
(Company Name)
required to work a minimum of _____ (not less than 20) hours per week in
order to qualify to participate in the company’s group benefit program(s)
through Western Mutual Insurance Company.

I certify that the forgoing policy and criteria is applicable to all employees and has been conveyed to all employees.

Signature and Title of Authorized Individual

Date