

Sun *Term* life insurance (one insured person)

Policy number: LI-1234,567-8

Owner: John Doe



The following policy wording is provided solely for your convenience and reference. It is incomplete and reflects only some of the general provisions that may be found in some of our insurance policies. We periodically make changes to policy wording and therefore this incomplete sample may not duplicate the wording of any actual issued policy. It is not to be construed or interpreted in any manner as a contract or an offer to contract. The actual policy issued to any given client will govern that relationship.

Table of contents

| Policy particulars | 3 |
|--|----|
| If you change your mind within 10 daysPrincipal insurance death benefit for single life coverage | |
| Paying for your policy | |
| Your right to convert a single life coverage | |
| Applying for changes to your policy | |
| Your right to cancel this policy | |
| When your policy ends | |
| Other information about your policy | |
| Insurance terms | g |
| Additional benefits Accidental death benefit | |
| Life insurance for the insured person's children | 15 |
| | |

Policy particulars

In this document, *you* and *your* mean the owner of this policy. We, us, our, and the company mean Sun Life Assurance Company of Canada.

Your policy is issued and underwritten by Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies.

Please read this policy carefully. It describes the benefits payable and exclusions and reductions of coverage.

SunTerm life insurance

Your policy number is: LI-1234,567-8

Your policy date is: June 30, 2008

The owner is: John Doe

The insured person is:

John Doe

born on March 10, 1970

The beneficiary is:

The beneficiary for each insurance coverage in this policy is named on your application, unless you make a change in writing to us.

The premium payable is the amount for all insurance coverages and optional benefits included in this policy, plus a policy fee. Your total initial annual premium is \$XXX.XX. Your annual policy fee is \$65.00.

Premiums are due annually on June 30th, starting on June 30, 2008.

A schedule of guaranteed premiums is included for each Sun*Term* insurance coverage in this policy.

This is not a participating policy. You are not eligible to receive dividends on this policy.

To help you understand insurance terms, refer to the explanations described later in this policy under the heading, *Insurance terms*.

Policy particulars (continued)

Sun*Term***10** \$500,000 on John Doe

Principal insurance death benefit: This single life coverage automatically renews every

10 years on the date the coverage is issued. Risk classification: non-smoker, class 2

Date this coverage ends: June 30, XXXX Last date to convert this coverage: June 30, XXXX

(optional benefit)

Accidental death benefit: \$XXX,XXX on John Doe

Date this benefit ends: June 30, XXXX

(optional benefit)

Total disability benefit: on John Doe Date this benefit ends: June 30, XXXX

(optional benefit)

Child term insurance benefit: \$XX,XXX on each insured child of John Doe

as described later in this policy.

Date this benefit ends:

June 30, XXXX

Schedule of guaranteed premiums

(1) Principal insurance

(2) Accidental death benefit

- (3) Total disability benefit
- (4) Child term insurance benefit

| | | | | | Annual | Monthly |
|--------------|--------------|--------|--------|--------|--------------|--------------|
| Beginning on | (1) | (2) | (3) | (4) | Premium (\$) | Premium (\$) |
| 30 June XXXX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX |
| 30 June XXXX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX |
| 30 June XXXX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX |
| 30 June XXXX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX | XXX.XX |
| 30 June XXXX | this coverag | e ends | | | | |

E00001#K

If you change your mind within 10 days

You may send us a written request to cancel your policy within:

- · 10 days of receiving it from us, or
- 60 days after the policy is issued, whichever date is earlier.

When we receive your written request we'll refund any amount paid. This is called rescission.

You are considered to have received your policy 5 days after it's mailed from our office, or on the date your advisor delivers it to you.

Your decision to cancel your policy is your personal right. The cancellation is binding on you and any beneficiaries you've named, whether the beneficiaries are revocable or irrevocable.

All of our obligations and liabilities under this policy will end immediately when we receive your request to cancel it.

To cancel your policy, send your request in writing to:

Sun Life Assurance Company of Canada 227 King St. S. PO Box 1601, Stn. Waterloo Waterloo ON Canada N2J 4C5

E00117#B

Principal insurance death benefit for single life coverage

The insured person for each single life coverage and the amount of the principal insurance death benefit for that coverage are shown at the beginning of your policy under the heading, *Policy particulars*.

If any insured person with a single life coverage dies while their coverage is in effect, we pay the following amount to the beneficiary named for this coverage:

- the principal insurance death benefit for that insured person, shown at the beginning of your policy under the heading, *Policy particulars*
- **minus** any premiums you owe us on the date the insured person dies.

The single life coverage ends on the date the insured person for that coverage dies.

How to make a claim for the death benefit

To make a claim, first contact us at the toll free phone number shown at the beginning of this policy. We will then send you the appropriate form to be completed. The person making the claim must complete the form and give us the information we need to assess the claim, including proof that the insured person died while their coverage was in effect.

The form and information must be sent to this address:

Life Claims Services
Sun Life Assurance Company of Canada
227 King St. S.
PO Box 1601, Stn. Waterloo
Waterloo ON Canada N2J 4C5

There may be a fee from a physician to complete certain forms. The person making the claim is responsible for any fee for this information.

Before we pay a death benefit, the age of the insured person must be verified. If the age given on the application is incorrect, we'll adjust the principal insurance death benefit to reflect the premiums that you paid and the insured person's correct age.

When we will not pay the death benefit (Exclusions and reductions of coverage)

We will not pay the death benefit for this coverage, if the insured person takes their own life, while sane or insane, within 2 years of the later of:

- the policy date, shown at the beginning of your policy under the heading, *Policy particulars*
- the effective date of this coverage, if you added it after the policy date, or
- the most recent date your policy was put back into effect, if the policy has been reinstated.

Instead of paying the death benefit, we will refund all the premiums you paid for the insured person's coverage. If your policy has been put back into effect, we'll refund the premiums you paid for the insured person's coverage since the most recent date the policy was reinstated.

If this policy is the result of a replacement of insurance

If the death benefit is the result of a replacement of life insurance that was issued by us, we determine the amount payable for the part that is a replacement based on the effective date or dates of your previous insurance and any additional benefits.

E00613#C

Paying for your policy

Premiums for this policy

We will provide you with the benefits described in this policy if you pay the premiums shown in the *Schedule of guaranteed premiums*. You must pay all premiums by the due date. Payments must be made to Sun Life Assurance Company of Canada. We reserve the right to refuse cash payments.

If premiums are not received (Lapse)

Once your policy is in effect, you must pay at least the minimum payment for the insurance you have as shown at the beginning of your policy under the heading, *Policy particulars*.

To prevent your policy from ending, we must receive the required premium before the end of the 31st day after it is due.

Putting your policy back into effect (Reinstatement)

If your policy ended because it lapsed, you may apply to have it put back into effect if the insured person is alive. This process is called reinstatement.

If you want to put your policy back into effect, you must:

- apply within 2 years of the policy ending
- · give us new evidence of insurability, for all of the insured persons, satisfactory to us, and
- · pay the reinstatement charge set by us.

If your application is not approved, we'll refund the amount you paid when you applied to put your policy back into effect.

E00771#C

Your right to convert a single life coverage

You may apply to convert a single life coverage in this policy for another life insurance policy as described below without giving us new evidence of insurability. You must send us an application on or before the final conversion date for the coverage as shown at the beginning of your policy under the heading, *Policy particulars*.

Converting to permanent life insurance

You may convert a single life coverage in this policy to a permanent life insurance policy for the insured person with that coverage.

Converting Sun Term 10 to a term life insurance policy that renews every 20 years

If this policy includes a Sun*Term*10 coverage, you may convert that coverage to a 20 year renewable and convertible term life insurance policy on that insured person before the earlier of:

- the 5th policy anniversary immediately following the date the *SunTerm*10 coverage was put into effect, and
- the policy anniversary immediately following the insured person's 60th birthday.

The new life insurance policy

We determine the type of life insurance policy you may convert to and the terms and conditions of that policy. The new policy we offer to you will:

- be determined by the information about the insured person in the application for this coverage
- depend on our rules about the age of the insured person and the amount of insurance, and
- have a death benefit that is not greater than the death benefit of the coverage that is being converted on the date the new application is signed.

You may include any additional benefits in the new policy that are included on the insured in this policy if they are available on the new policy. The amount of each benefit cannot be greater than the amount of that same benefit in this policy. The terms and conditions of each benefit in the new policy will be the standard terms and conditions we're offering at the time you convert your coverage.

If your application for conversion is approved, the coverage being converted ends on the date the new policy takes effect.

Paying for the new policy

The premiums for the new policy will be based on:

- the same evidence of insurability we used to determine the premiums for the insured person's coverage being converted
- the premium rates we charge for the new insurance at the time you apply for the new policy, and
- the age of the insured person when you apply for the new policy.

The first payment for the new policy is due on the date the policy is issued.

If this policy includes a Total disability benefit

If the insured person for the life insurance coverage being converted has a *Total disability benefit*, the new life insurance policy will also have a *Total disability benefit* or equivalent benefit.

If that insured person is totally disabled, and premiums are being waived under the *Total disability* benefit, you cannot convert their life insurance coverage while they are disabled.

However, if that insured person continues to be totally disabled you may convert their life insurance coverage to a permanent life insurance policy on the final conversion date shown at the beginning of this policy under the heading, *Policy particulars*. The premiums on the new permanent life insurance policy will be waived while the insured person is disabled.

E00820#B

Applying for changes to your policy

You may apply for the following changes to your policy:

- · add additional insurance coverage under this policy for an existing insured person, and
- · add new insurance coverage and optional benefits under this policy on a new insured person.

If your application is approved, the change will take effect on the next policy anniversary.

We determine the type of additional coverage you may apply for and the terms and conditions of that coverage.

The additional insurance we offer you will depend upon:

- · the age of the person to be insured
- · the amount of insurance, and
- our rules at the time you apply for the change.

We require new evidence of insurability to determine the risk classification for the new insurance. If your application is approved, your policy will be changed accordingly.

E00838#B

Your right to cancel this policy

You may cancel your policy at any time. Your decision to cancel your policy is your personal right. The cancellation is binding on you and any beneficiaries you've named, whether the beneficiaries are revocable or irrevocable.

Your policy will end on the date we receive your request or any later date you indicate in your request. To cancel your policy, send your request in writing to:

Sun Life Assurance Company of Canada 227 King St. S. PO Box 1601, Stn Waterloo Waterloo ON Canada N2J 4C5

If you cancel your policy within the first 10 days of receiving it from us, we will treat this as a rescission. This is described earlier in your policy under the heading, *If you change your mind within 10 days*.

If you cancel your policy after the 10th day of receiving it from us, we'll refund the balance of any premium fund.

All of our obligations and liabilities under this policy end immediately on the date we receive your request or on any later date you indicate in your request.

E00851#A

When your policy ends

If your policy hasn't ended for any of the reasons already described, it will automatically end on the date no Sun*Term* coverages are in effect. The end date for each Sun*Term* coverage is shown at the beginning of your policy under the heading, *Policy particulars*. There are no longer any benefits payable under this policy after the date your policy ends.

E00866#C

Other information about your policy

Information about our contract with you

Once your policy is in effect, the following documents make up our entire contract with you:

- · your application for insurance, including any evidence of insurability, and
- · this policy.

All of our obligations to you are contained in the documents described above. Any other document or oral statement does not form part of this contract. This policy or any part of this policy may not be amended or waived except by a written amendment signed by two authorized signing officers of the company.

Currency of this policy

All amounts of money referred to in this policy are in Canadian dollars.

Transferring your policy (assignment)

You may be able to transfer your rights under this policy to someone else by assigning the policy. We are not responsible for ensuring that the assignment of your policy is legally valid. If you transfer this policy, send a notice of the assignment to:

Sun Life Assurance Company of Canada 227 King St. S. PO Box 1601, Stn. Waterloo Waterloo ON Canada N2J 4C5

E00937#A

Insurance terms

The following explanations describe insurance terms that apply if the terms appear in this policy.

Beneficiary

The person or persons you name in writing to receive a death benefit.

Contingent owner

The person or persons you name in writing to take ownership of this policy if you die before the date this policy ends.

Coverages

A Sun Term policy consists of components, called coverages. Available coverages include:

- · a single life principal insurance death benefit
- a joint first-to-die principal insurance death benefit, available on 2 insured persons.

Evidence of insurability

This may include medical, financial, lifestyle, tobacco usage, family medical history information and other personal history information needed to approve an application for life insurance.

Issue date

Each coverage in this policy has an issue date that identifies when the specific coverage begins.

Optional benefits

Optional benefits are additional types of insurance protection that you may apply to have in this policy. An example of an optional benefit is the Total disability benefit.

Permanent insurance

A type of insurance that provides protection for the entire lifetime of the insured person.

Policy anniversary

The month and day every year that is the same as your policy date.

Policy date

The policy date is the start date of your insurance policy.

Premium

The amount you pay to purchase and maintain an insurance policy.

Risk classification

We use a risk classification system to evaluate evidence of insurability and classify insured persons based on anticipated insurance risk.

Insurance premiums are determined by the risk classification.

Term insurance

A type of insurance that provides protection for a limited number of years.

Additional benefits

E00352#B (optional benefit)

Accidental death benefit

The insured person for this benefit and the amount of their Accidental death benefit are shown at the beginning of your policy under the heading, *Policy particulars*.

We pay the named beneficiary the Accidental death benefit, if this benefit is in effect and the insured person dies:

- · as a direct result of an accident
- · independently of any other cause
- · within 365 days of the accident, and
- before the policy anniversary immediately following the insured person's 70th birthday.

When we will not pay the Accidental death benefit (Exclusions and reductions of coverage)

We will not pay the Accidental death benefit if the insured person's death or accident is directly or indirectly caused by or associated with the insured person operating a vehicle while their blood alcohol level is more than 80 milligrams of alcohol per 100 milliliters of blood. A vehicle includes any form of ground, air or marine transportation that can be put into motion by any means, including muscular power. We do not take into account whether or not the vehicle is in motion.

We will not pay the Accidental death benefit if the insured person's death or accident is directly or indirectly caused by or associated with the insured person:

- · committing or attempting to commit a criminal offence
- · attempting to take their own life, while sane or insane
- · causing themself bodily injury, while sane or insane
- taking any drug, unless the drug was taken as prescribed by a licensed medical practitioner
- · inhaling or ingesting any poisonous substance, whether voluntarily or otherwise
- · inhaling any type of gas, whether voluntarily or otherwise
- · having a mental or physical illness or receiving treatment for that illness
- · receiving dental or surgical treatment, or
- · contracting an infection, unless the infection was caused by an external visible wound received in an accident.

We will not pay the Accidental death benefit if the insured person's death or accident is directly or indirectly caused by or associated with civil disorder or war, whether declared or not.

When this benefit ends

The Accidental death benefit on the insured person automatically ends on the earliest of:

- the date the insured person dies
- the date the benefit ends, shown at the beginning of your policy under the heading, *Policy* particulars, or
- the date this policy ends.

E00408#E (optional benefit)

Total disability benefit (waiving premiums)

The insured person for this benefit and the end date for this benefit are shown at the beginning of your policy under the heading, *Policy particulars*.

You may qualify to stop paying premiums for the insured person's coverage if:

- the insured person becomes totally disabled as described below under the heading, *Qualifying for this benefit*
- the total disability begins before the end date of this Total disability benefit shown on the *Policy* particulars page, and
- the total disability continues for more than 6 consecutive months.

When you qualify to stop paying premiums under this benefit it is called waiving premiums.

For the duration of the insured person's disability we waive premiums for:

- the principal insurance for any single or joint life coverage insuring the disabled insured person
- the total disability benefits on any single life coverage insuring the disabled insured person
- · all total disability benefits on any joint life coverage insuring the disabled insured person, and
- all other optional benefits on the disabled insured person only, on any single or joint life coverage insuring the disabled insured person.

Qualifying for this benefit

When we consider the insured person to be totally disabled

The insured person is disabled if, as a result of injury or disease, they are unable to perform any occupation for remuneration or profit within their education, training or experience.

In determining whether or not the insured person is able to perform any occupation, we do not take into account whether a suitable occupation is actually available. In addition, we do not consider whether a suitable occupation would provide a level of remuneration comparable to the one the insured person had before becoming disabled.

When we will not waive premiums (Exclusions and reductions of coverage)

We will not waive premiums if the disability is directly or indirectly caused by or associated with the insured person operating a vehicle while their blood alcohol level is more than 80 milligrams of alcohol per 100 milliliters of blood. A vehicle includes any form of ground, air or marine transportation that can be put into motion by any means, including muscular power. We do not take into account whether or not the vehicle is in motion.

We will not waive premiums if the disability is directly or indirectly caused by or associated with the insured person:

- · committing or attempting to commit a criminal offence
- · attempting to take their own life, while sane or insane
- · causing themself bodily injury, while sane or insane
- taking any drug, unless the drug was taken as prescribed by a licensed medical practitioner
- · inhaling or ingesting any poisonous substance, whether voluntarily or otherwise, or
- · inhaling any type of gas, whether voluntarily or otherwise.

We will not waive premiums if the insured person's disability is directly or indirectly caused by or associated with civil disorder or war, whether declared or not.

We do not consider the insured person to be disabled unless they are:

- · under the active, continuous and medically appropriate care of a physician, or other health care practitioner acceptable to us, and
- following the treatment prescribed and any other recommendations made by a physician or health care practitioner.

Making a claim for this benefit

While this benefit is in effect, you may submit a claim if the insured person's disability began before the policy anniversary immediately following their 60th birthday.

To make a claim for this benefit, contact us at the toll free phone number shown at the beginning of this policy for the appropriate form.

Before we approve the claim, the age of the insured person must be verified.

We must receive proof of the disability:

- · while the insured person is alive
- after the insured person's disability continued for more than 6 consecutive months, and
- within 1 year of the date the disability began.

We'll consider a late claim exception if we receive proof of disability no later than 1 year following the end date of this benefit. If we receive proof of the disability more than 1 year after it starts and the insured person qualifies for this benefit, we consider the disability to have started 1 year before we received the proof. This means that we will only waive premiums starting from 1 year before we received the proof, regardless of when the disability actually started.

You must pay any cost associated with supplying proof of the disability.

We may also require the insured person to authorize us to gather and use additional information from other insurers or government agencies.

When we waive premiums

You must continue to pay your premiums until we notify you that we've waived them. At that time, we waive the premiums from the month the insured person's disability started.

If any premium is paid and later waived we credit the same amount to your premium fund.

How to continue to qualify for this benefit

We continue to waive premiums as long as the insured person:

- · continues to be disabled
- · is under the continuous care of a physician
- · follows a prescribed treatment program for the disability, and
- · makes reasonable efforts to use any appropriate rehabilitation program.

From time to time, we will ask for proof, that we consider satisfactory, that the insured person is still disabled. You must pay any cost associated with supplying this proof.

We may require the insured person to be examined by any health care practitioners that we appoint. These may be licensed physicians, physiotherapists, occupational therapists, psychiatrists, psychologists or others. We pay for the cost of these examinations.

The physicians, specialists or health care practitioners who provide information to us may not be an owner of this policy, any person insured under this policy, any person entitled to make a claim under this policy, or any relative or business associate of these people.

We may also require the insured person to authorize us to gather and use information from other insurers or government agencies.

Continuation of a previous disability claim

You may apply to have premiums waived without having to wait another 6 months if there is a continuation of a previous disability claim. We consider the disability to be a continuation of the previous one if:

- premiums had been waived
- the disabled insured person recovers from their disability and then becomes disabled again from the same cause within 6 months from the date we stopped waiving premiums, and
- the insured person is disabled as described under the heading, Qualifying for this benefit.

We waive the premiums from the date the disability started again.

When we stop waiving premiums

We stop waiving premiums on the date the insured person:

- · is no longer disabled
- takes part in any occupation for remuneration or profit
- · fails to submit any required proof of disability
- · refuses to attend any examinations or rehabilitation programs without a valid medical reason, or
- fails to meet any other requirements to have the premiums waived.

If this policy ends while the insured person is disabled

We will not put any principal insurance or optional benefit on the disabled insured person back into effect if you cancelled this policy. However, if your policy ended for any other reason while the insured person was disabled, you may apply to have any principal insurance or optional benefit on the disabled insured person put back into effect, without giving us new evidence of insurability.

We will put any principal insurance or optional benefit on the disabled insured person back into effect if the policy ended:

- while the insured person was disabled and the disability continued for more than 6 consecutive months, and
- before the end date of the *Total disability benefit* for the disabled insured person, shown at the beginning of your policy under the heading, *Policy particulars*.

If you want to put any principal insurance or optional benefit for the disabled insured person back into effect, you must:

- apply while the insured person is alive
- · apply within 1 year of the policy ending, and
- give us proof, that we consider satisfactory, of the disability and the length of time the insured person was disabled.

When this benefit ends

The Total disability benefit on the insured person automatically ends on the earliest of:

- the date the insured person for this benefit dies
- · the date this benefit ends, or
- the date this policy ends.

E00560#H (optional benefit)

Life insurance for the insured person's children (Child term insurance benefit)

The children insured under this benefit are those named on the application, unless we tell you that we will not insure a child you have named. The children insured must be born to or legally adopted by the insured person.

Children born to or legally adopted by the insured person after the date you applied for this benefit are automatically insured under this benefit. We may ask you to prove the child's relationship to the insured person.

If a child dies while insured under this benefit, we pay the child term insurance benefit shown at the beginning of your policy under the heading, *Policy particulars*. We pay this benefit to you, the owner of this policy.

We will pay the child term insurance benefit even if the insured child takes their own life, while sane or insane.

When we will not pay the child term insurance benefit (Exclusions and reductions of coverage)

We will not pay a child term insurance benefit if the insured child dies:

- before they are 15 days old, or
- · after they are 25 years old.

When we pay a reduced child term insurance benefit

If an insured child dies after age 14 days and before age 180 days and we approve a claim for this benefit, the maximum amount we pay is 25% of the child term insurance benefit.

Making a claim for this benefit

To make a claim when an insured child dies, contact us at the toll free phone number shown at the beginning of this policy. We will then send you the appropriate form to be completed. The person making the claim must give us any information we need to assess the claim, including proof that the insured child died while this benefit was in effect.

There may be a fee from a physician to complete certain forms. You are responsible for any fee for this information.

Your right to buy life insurance on the insured children

You may buy a separate life insurance policy on each of the insured children, without giving us new evidence of insurability. However, you must give us proof of each child's age.

You can apply to buy a separate life insurance policy on the life of an insured child on any date after their 18th birthday and before their 25th birthday. The child must have been insured under this benefit for at least 3 years before you apply for a new policy.

Within the 30 days immediately before the date this benefit ends, as shown at the beginning of your policy under the heading, *Policy particulars*, you may buy a separate life insurance policy on an insured child who is under age 18, or who has not been insured for 3 years under this benefit. However, you may not buy a separate life insurance policy for an insured child who has reached the age of 25.

The following people may buy a separate life insurance policy on each of the insured children:

- · the owner of this policy, or
- the insured child on their own life, with your written consent.

Under this benefit, we will not issue more than one new life insurance policy on any child insured under this benefit.

The new life insurance policy

We determine the type of policy you may apply for and the terms and conditions of that policy. The new policy we offer to you will:

- · be determined by the information about the insured child in the application for this benefit
- · depend on our rules about the age of the insured child and the amount of insurance
- have a death benefit that is not greater than 5 times the child term insurance benefit under this policy,
 and
- · include additional premiums for smoking, unless the insured child gives us evidence of insurability and qualifies as a non-smoker.

If we approve the new application, the new policy takes effect on the date the new application is signed.

Paying for the new policy

The premiums for the new policy will be based on:

- the same evidence of insurability we used to determine the premiums for this benefit
- the premium rates we charge for the new insurance at the time you apply for the new policy, and
- the age of the insured child when you apply for the new policy.

The first payment for the new policy must be included with your application for the new policy.

When this benefit ends for each child

This benefit automatically ends for each child on the earliest of:

- that child's 25th birthday
- the date an application to buy a new life insurance policy for that child was signed, as described under the heading, *Your right to buy life insurance on the insured children*
- the date this benefit ends, shown at the beginning of your policy under the heading, *Policy* particulars, or
- the date this policy ends, unless the insured person dies while this benefit is in effect.

If the insured person dies while the *Child term insurance benefit* is in effect, we continue to insure any children still covered under this benefit until the earliest of:

- the date an application is signed to buy a new life insurance policy for that child under this benefit, or
- that child's 25th birthday.

After the death of the insured person, you no longer need to make payments to keep this benefit in effect.