



SCHEDULE
RIDER #6

POLICY MODIFICATIONS: This policy as issued is amended as follows:

In consideration of the second annual installment premium of \$182,967.22, it is agreed that coverage under this policy shall continue in force for a period of 12 months commencing on the effective date of this rider.

This page is a policy page issued and effective on the Policy Effective Date unless dates are shown below making this page a rider.

RIDER: This rider, issued March 19, 2010, forms a part of Policy No. ETB-105355 issued to Board of County Commissioners, Miami - Dade County.

It is effective August 29, 2010. It does not vary, waive, alter or extend any of the terms, conditions, or provisions of the policy, except as stated herein. Signed for the Hartford Life and Accident Insurance Company.

Ricardo A. Anzaldua, Secretary

John C. Walters, President



Privacy Policy and Practices of The Hartford Financial Services Group, Inc. and its Affiliates
(herein called "we, our, and us")

This Privacy Policy applies to our United States Operations

We value your trust. We are committed to the responsible:

- a) management;
 - b) use; and
 - c) protection;
- of **Personal Information**.

This notice describes how we collect, disclose, and protect **Personal Information**.

We collect **Personal Information** to:

- a) service your **Transactions** with us; and
- b) support our business functions.

We may obtain **Personal Information** from:

- a) **You**;
- b) your **Transactions** with us; and
- c) third parties such as a consumer-reporting agency.

Based on the type of product or service **You** apply for or get from us, **Personal Information** such as:

- a) your name;
 - b) your address;
 - c) your income;
 - d) your payment; or
 - e) your credit history;
- may be gathered from sources such as applications, **Transactions**, and consumer reports.

To serve **You** and service our business, we may share certain **Personal Information**. We will share **Personal Information**, only as allowed by law, with affiliates such as:

- a) our insurance companies;
- b) our employee agents;
- c) our brokerage firms; and
- d) our administrators.

As allowed by law, we may share **Personal Financial Information** with our affiliates to:

- a) market our products; or
 - b) market our services;
- to **You** without providing **You** with an option to prevent these disclosures.

We may also share **Personal Information**, only as allowed by law, with unaffiliated third parties including:

- a) independent agents;
 - b) brokerage firms;
 - c) insurance companies;
 - d) administrators; and
 - e) service providers;
- who help us serve **You** and service our business.

When allowed by law, we may share certain **Personal Financial Information** with other unaffiliated third parties who assist us by performing services or functions such as:

- a) taking surveys;
- b) marketing our products or services; or
- c) offering financial products or services under a joint agreement between us and one or more financial institutions.

We will not sell or share your **Personal Financial Information** with anyone for purposes unrelated to our business functions without offering **You** the opportunity to:

- a) "opt-out;" or
 - b) "opt-in;"
- as required by law.

We only disclose **Personal Health Information** with:

- a) your proper written authorization; or
- b) as otherwise allowed or required by law.

Our employees have access to **Personal Information** in the course of doing their jobs, such as:

- a) underwriting policies;
- b) paying claims;
- c) developing new products; or
- d) advising customers of our products and services.

We use manual and electronic security procedures to maintain:

- a) the confidentiality; and
 - b) the integrity of;
- Personal Information** that we have. We use these procedures to guard against unauthorized access.

Some techniques we use to protect **Personal Information** include:

- a) secured files;
- b) user authentication;
- c) encryption;
- d) firewall technology; and
- e) the use of detection software.

We are responsible for and must:

- a) identify information to be protected;
- b) provide an adequate level of protection for that data;
- c) grant access to protected data only to those people who must use it in the performance of their job-related duties.

Employees who violate our Privacy Policy will be subject to discipline, which may include ending their employment with us.

At the start of our business relationship, we will give **You** a copy of our current Privacy Policy.

We will also give **You** a copy of our current Privacy Policy once a year if **You** maintain a continuing business relationship with us.

We will continue to follow our Privacy Policy regarding **Personal Information** even when a business relationship no longer exists between us.

As used in this Privacy Notice:

Application means your request for our product or service.

Personal Financial Information means financial information such as:

- a) credit history;
- b) income;
- c) financial benefits; or
- d) policy or claim information.

Personal Health Information means health information such as:

- a) your medical records; or
- b) information about your illness, disability or injury.

Personal Information means information that identifies **You** personally and is not otherwise available to the public. It includes:

- a) **Personal Financial Information**; and
- b) **Personal Health Information**.

Transaction means your business dealings with us, such as:

- a) your **Application**;
- b) your request for us to pay a claim; and
- c) your request for us to take an action on your account.

You means an individual who has given us **Personal Information** in conjunction with:

- a) asking about;
 - b) applying for; or
 - c) obtaining;
- a financial product or service from us if the product or service is used mainly for personal, family, or household purposes.

This Privacy Policy is being provided on behalf of the following affiliates of The Hartford Financial Services Group, Inc.:

American Maturity Life Insurance Company; Hartford Accident and Indemnity Company; Hartford Administrative Services Company; Hartford Casualty Insurance Company; Hartford Equity Sales Company, Inc.; Hartford Fire Insurance Company; Hartford Fire General Agency, Inc.; Hartford HLS Series Fund II, Inc.; Hartford Insurance Company of Illinois; Hartford Insurance Company of the Midwest; Hartford Insurance Company of the Southeast; Hartford International Life Reassurance Corporation; Hartford Investment Advisory Company, LLC; Hartford Investment Financial Services, LLC; Hartford Investment Management Company; Hartford Life and Accident Insurance Company; Hartford Life and Annuity Insurance Company; Hartford Life Insurance Company; Hartford Lloyd's Insurance Company; Hartford Mezzanine Investors I, LLC; Hartford Retirement Services, LLC ; Hartford Securities Distribution Company, Inc.; Hartford Series Fund, Inc.; Hartford Specialty Company; Hartford Specialty Insurance Services of Texas, LLC; Hartford Underwriters Insurance Company; Hartford-Comprehensive Employee Benefit Service Company; HL Investment Advisors, LLC; Hartford Life Private Placement, LLC; M-CAP Insurance Agency, LLC; New England Insurance Company; Nutmeg Insurance Agency, Inc.; Nutmeg Insurance Company; Pacific Insurance Company, Limited; Planco, LLC; Hartford Life Distributors, LLC; Property and Casualty Insurance Company of Hartford; Sentinel Insurance Company, Ltd.; Specialty Risk Services, LLC.; The Hartford Income Shares Fund, Inc.; The Hartford Mutual Funds II, Inc.; The Hartford Mutual Funds, Inc.; Trumbull Insurance Company; Trumbull Services, L.L.C.; Twin City Fire Insurance Company; Woodbury Financial Services, Inc.

Questions about this Privacy Policy may be directed to the following address: The Hartford, GBD Compliance Dept., 200 Hopmeadow St., Simsbury, CT 06089.

Group Benefits from The Hartford



August 10, 2009

Kim J. Lowe
AON Consulting

Re: Board of County Commissioners, Miami - Dade County
Policy Number: ETB-105355

Dear Kim,

Effective July 1, 2009, under HAZARDS, BENEFITS AND AMOUNTS of the above policy, the ADD and AD Benefit Amounts are adjusted by the Consumer Price Index set forth by the Bureau of Criminal Justice & The State Fire Marshall Office as defined by Statutes 112.19 & 112.191. This year the benefit amounts were decreased based on the Consumer Price Index but The Hartford is holding your benefits as follows:

HAZARDS, BENEFITS AND AMOUNTS:

<u>Class</u>	<u>Hazard</u>	<u>Benefit</u>	<u>Amount</u>
1a	C-62	ADD	\$59,694.46 in the line of duty
	C-64	AD	\$59,694.46 fresh pursuit
	C-31 VL118	AD	\$179,083.29 unlawful & intentional death
1b	C-62	ADD	\$59,694.46 in the line of duty
	C-64	AD	\$59,694.46 fresh pursuit
1c	C-31 VL118	AD	\$179,083.29 unlawful & intentional death
2a	C-62	ADD	\$59,694.46 in the line of duty
	C-64	AD	\$59,694.46 fresh pursuit
	C-31 VL118	AD	\$179,083.29 unlawful & intentional death
2b	C-62	ADD	\$59,694.46 in the line of duty
	C-64	AD	\$59,694.46 fresh pursuit
3	C-62	ADD	\$25,000.00 in the line of duty
4	C-62	ADD	\$25,000.00 in the line of duty

Hartford Life Group Benefits Division
Business Travel Accident Underwriting
1125 Sanctuary Park, Suite 500
Alpharetta, GA 30009
Toll Free 888 560 9632
Facsimile 866 954 3993
Mailing Address: P.O. Box 2250
Alpharetta, GA 30023

Expertise without equal.
Benefits without burden.SM

Group Benefits from The Hartford

August 7, 2009

Kim J. Lowe
AON Consulting

Re: Board of County Commissioners, Miami - Dade County
Policy Number: ETB-105355

Dear Kim,

Effective July 1, 2007, the definition of injury of the above policy is expanded as defined by Statutes 112.18, 112.181 & 112.1815 and amended to include the following:

Policy Modifications

- a) Any occupational condition or impairment of health of a fireman or any law enforcement officer or correctional officer caused by tuberculosis, heart disease, or hypertension resulting in death shall be presumed to be accidental, suffered in the line of duty and to be a covered Injury. To be entitled to this presumption, the definitions and requirements of Section 112.18 must be met.
- b) Any firefighter, paramedic, emergency medical technician, law enforcement officer, or correctional officer who suffers an occupational condition or impairment of health that is caused by hepatitis, meningococcal meningitis, or tuberculosis, that requires medical treatment, and that results in death shall be presumed to have been accidental and to be a covered Injury. To be entitled to this presumption, the definitions and requirements of Section 112.181 must be met.
- c) Any covered firefighter, paramedic, emergency medical technician, law enforcement officer, or correctional officer who suffers an occupational condition or impairment of health that is caused by exposure to a toxic substance, adverse results or complications from a smallpox vaccination, or a mental or nervous Injury, that requires medical treatment, and that results in death shall be presumed to have been accidental and to be a covered Injury. To be entitled to this presumption, the definitions and requirements of Section 112.1815 must be met.

This policy provides accidental death coverage for police officers and firefighters which is no less restrictive than benefits specified by Florida statutes 112.19, paragraphs 2) a, b, c, f, and j and 112.191, paragraphs 2) a, b, c and i.

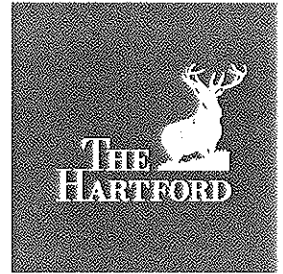
This letter is to be attached to and made a part of the above policy. Please send one copy to the Policyholder & keep one for your records.

Sincerely,

Kathyann Noel & Rachel Popkowski
Florida Statutory Underwriters
Phone: 678-566-4323 or 678-566-4379

Hartford Life Group Benefits Division
Business Travel Accident Underwriting
1125 Sanctuary Park, Suite 500
Alpharetta, GA 30009
Toll Free 888 560 9632
Facsimile 866 954 3993
Mailing Address: P.O. Box 2250
Alpharetta, GA 30023

Expertise without equal.
Benefits without burden.SM



This letter is to be attached to and made a part of the above policy. Please send one copy to the Policyholder & keep one for your records.

Should you have any questions regarding this information, please feel free to contact us. We appreciate your continued business.

Sincerely,

Kathyann Noel & Rachel Popkowski
Florida Statutory Underwriters
Phone: 678-566-4323 or 678-566-4379



SCHEDULE
RIDER #5

POLICY MODIFICATIONS: This policy as issued is amended as follows:

In consideration of a premium of \$365,934.44, it is agreed that coverage under this policy shall continue in force for a term of 24 months, commencing on the effective date of this rider. This premium is payable in two equal annual installments of \$182,967.22. Each installment is due and payable on August 29th of each year.

It is further understood and agreed that the section ELIGIBLE PERSONS is amended to read as follows:

<u>Class</u>	<u>Description</u>
1a	All Police Officers of the Policyholder in the following Municipalities: Miami-Dade County Bal Harbour Bay Harbor Biscayne Park El Portal Florida City Golden Beach Hialeah Gardens Homestead Indian Creek Miccosukee Indian Tribe North Miami Beach Opa-Locka Sweetwater Virginia Gardens West Miami
1b	All Police Officers of the Policyholder in the following Municipalities: Hialeah
1c	All Police Officers of the Policyholder in the following Municipalities: North Miami
2a	All Firefighters of the Policyholder in the following Municipalities: Miami-Dade County
2b	All Firefighters of the Policyholder in the following Municipalities: Hialeah
3	All Clerical, administrative, Managerial, and Supervisory Employees of the Policyholder in the following Municipalities: Miami-Dade County Bal Harbour Bay Harbor

Biscayne Park
El Portal
Florida City
Golden Beach
Hialeah Gardens
Indian Creek
Miccosukee Indian Tribe
Opa-Locka
Public Health Trust
Sweetwater
Virginia Gardens
West Miami

4

All other employees of the Policyholder, including Board Members, in the following Municipalities:

Miami-Dade County
Bal Harbour
Bay Harbor
Biscayne Park
Golden Beach
Hialeah Gardens
Indian Creek
Miccosukee Indian Tribe
Opa-Locka
Public Health Trust
Sweetwater
Virginia Gardens

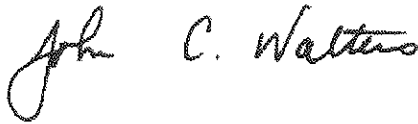
This page is a policy page issued and effective on the Policy Effective Date unless dates are shown below making this page a rider.

RIDER: This rider, issued August 18, 2009, forms a part of Policy No. ETB-105355 issued to Board of County Commissioners, Miami - Dade County.

It is effective August 29, 2009. It does not vary, waive, alter or extend any of the terms, conditions, or provisions of the policy, except as stated herein. Signed for the Hartford Life and Accident Insurance Company.



Ricardo A. Anzaldúa, Secretary



John C. Walters, President



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We may obtain **Personal Information** from:

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Based on the type of product or service **You** apply for or get from us, **Personal Information** such as:

- a) your name;
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may be gathered from sources such as applications, **Transactions**, and consumer reports.

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Personal Health Information means health information such as:

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Personal Information means information that identifies **You** personally and is not otherwise available to the public. It includes:

- a) **Personal Financial Information**; and
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Transaction means your business dealings with us, such as:

- a) your **Application**;
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- c) your request for us to take an action on your account.

You means an individual who has given us **Personal Information** in conjunction with:

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Questions about this Privacy Policy may be directed to the following address: GBD Compliance, The Hartford, P.O. Box 2999, Hartford, CT 06104-2999.