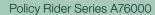
OPTIONAL INITIAL DIAGNOSIS BENEFIT RIDER SUMMARY PAGE







PEACE of MIND. CASH BENEFITS.

OUR INSURANCE POLICIES HELP PROVIDE BOTH.

Riders become part of the policy and are subject to all policy provisions, unless otherwise stated.

WHAT WE WILL PAY

INITIAL DIAGNOSIS BENEFIT Primary Insured/ □ \$2,500 □ \$5,000 □ \$7,500 □ \$10,000 Spouse

Dependent

Child □ \$5,000 □ \$10,000 □ \$15,000 □ \$20,000

Aflac will pay the amount shown in the Policy Schedule when a Covered Person is diagnosed with Internal Cancer or an Associated Cancerous Condition while the rider is in force. This benefit is payable only once for each Covered Person. In addition to the positive medical diagnosis, additional information from the attending Physician and hospital may be required.

INITIAL DIAGNOSIS BUILDING BENEFIT

Aflac will increase the Initial Diagnosis Benefit by \$500 on each rider anniversary date. This benefit is payable

under the same terms as the Initial Diagnosis Benefit. This benefit will cease to build for each Covered Person on the anniversary date of the rider following the Covered Person's 65th birthday or at the time Internal Cancer or an Associated Cancerous Condition is diagnosed for that Covered Person, whichever occurs first. Regardless of the age of the Covered Person on the Effective Date of the rider, the benefit will accrue for a period of at least five years, unless Internal Cancer or an Associated Cancerous Condition is diagnosed prior to the fifth year of coverage.

NATIONAL CANCER INSTITUTE (NCI) **EVALUATION/CONSULTATION BENEFIT**

Aflac will pay \$1,000 when a Covered Person seeks evaluation or consultation at an NCI-designated Cancer center as a result of receiving a diagnosis of Internal Cancer or an Associated Cancerous Condition. The purpose of the evaluation/consultation must be to determine the appropriate course of treatment. This benefit is also payable at the Aflac Cancer Center and Blood Disorders Service of Children's Healthcare of

REFER TO THE POLICY AND RIDER FOR COMPLETE DEFINITIONS, DETAILS, LIMITATIONS, AND EXCLUSIONS.



A76076LWA RC(10/11) Atlanta. This benefit is payable only once per Covered Person and is not payable the same day the Additional Surgical Opinion Benefit is payable.

ADDITIONAL SURGICAL OPINION BENEFIT

Aflac will pay \$300 per day when a charge is incurred for an additional surgical opinion by a Physician concerning surgery for a diagnosed Cancer or an Associated Cancerous Condition. This benefit is not payable the same day the NCI Evaluation/Consultation Benefit is payable. No lifetime maximum.

MEDICAL IMAGING WITH DIAGNOSIS BENEFIT

Aflac will pay \$200 per calendar year when a charge is incurred for each Covered Person who receives an initial diagnosis or follow-up evaluation for Internal Cancer or an Associated Cancerous Condition using one of the following medical imaging exams: CT scans, MRIs, bone scans, thyroid scans, multiple gated acquisition (MUGA) scans, positron emission tomography (PET) scans, transrectal ultrasounds, or abdominal ultrasounds. Exams must be performed in a hospital, an ambulatory surgical center, or a Physician's office. This benefit is limited to one payment per calendar year, per Covered Person. No lifetime maximum.

subsequent recurrence, extension, or metastatic spread of such Cancer or Associated Cancerous Condition;
(2) Cancer or Associated Cancerous Conditions diagnosed during the rider's 30-day waiting period; or
(3) the diagnosis of Nonmelanoma Skin Cancer. Any Covered Person who has had a previous diagnosis of Internal Cancer or an Associated Cancerous Condition will NOT be eligible for an Initial Diagnosis Benefit or an Initial Diagnosis Building Benefit under the rider for a recurrence, extension, or metastatic spread of that same Internal Cancer or Associated Cancerous Condition.

TERMS YOU NEED TO KNOW

EFFECTIVE DATE

The Effective Date of the rider is the Effective Date listed in the Policy Schedule.

TERMINATION

The rider will terminate if the policy to which it is attached terminates or if the premium for the rider is not paid.

WHAT IS NOT COVERED

LIMITATIONS AND EXCLUSIONS

The rider contains a 30-day waiting period. If Cancer or an Associated Cancerous Condition is diagnosed in a Covered Person before coverage has been in force 30 days from the Effective Date, benefits for treatment of that Cancer or Associated Cancerous Condition will apply only to treatment occurring after 30 days from the Effective Date of the rider or, at your option, you may elect to void the rider from its beginning and receive a full refund of premium.

The Initial Diagnosis Benefit and Initial Diagnosis Building Benefit of the rider are not payable for (1) any Internal Cancer or Associated Cancerous Condition diagnosed or treated before the Effective Date of the rider, and the

