THIS IS NOT A CONTRACT FOR INSURANCE

Consumer

BORROWER 1 NAME

BORROWER 2 NAME

LOAN PAYMENT PROTECTION CONTRACT (“Contract”)

PROTECTED LOAN(S)

ACCOUNT NUMBER: __________________________

OPTIONS

YOU ELECT THE FOLLOWING OPTION:

<table>
<thead>
<tr>
<th>Life, Disability and Unemployment</th>
<th>Disability and Unemployment</th>
<th>Life</th>
<th>No Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>- Disability, Involuntary Unemployment</td>
<td>Life</td>
<td></td>
</tr>
<tr>
<td>Disability</td>
<td></td>
<td>- Life</td>
<td></td>
</tr>
<tr>
<td>Involuntary Unemployment</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Program Fee: Rate per $100 of the Monthly Outstanding Loan Balance

- $0.292
- $0.184
- $0.097

Estimated Total Fees for Option chosen (Closed-End Only) $ ______

This Contract protects the first two Borrowers listed on the lending agreement.

ELIGIBILITY QUESTIONS:

Subject to the terms, conditions and exclusions, You are eligible for protection under this Contract if You are a Borrower on the Loan on the Effective Date of Protection and meet the eligibility requirements below.

If electing an option with Disability or Involuntary Unemployment, You must answer Question 1.

1. Are You actively working, for wages or profit, for 25 hours or more per week on the date You sign this Contract?

You will be considered actively working if You are absent from work due to sabbatical, strike, or vacation, but will soon return to work. You will not be considered actively working if You are on an Annual, Regularly Scheduled or Seasonal Layoff, medical or Disability leave.

Borrower 1

Yes [ ] No [ ]

Borrower 2

Yes [ ] No [ ]

If at least one Borrower answered “Yes” to Question 1, both Borrowers are eligible for options that include Disability or Involuntary Unemployment protection.

Important Notices:

Please read this Contract in its entirety. You are bound by the terms and conditions of this Contract.

- We reserve the right to refuse Your purchase of the protection.
- In this Contract, the term “You” or “Your” mean the Borrower(s) and “We”, “Us”, or “Our” mean the Creditor.
- Protection is voluntary and not required to obtain credit. We will not consider whether or not You elect protection in making a credit decision.
- This Contract contains terms and conditions which may limit or exclude benefits.
- You may not qualify for all benefits.
- Protection is limited to a maximum of $50,000. You will not be charged a Program Fee on any amount greater than this maximum.
- Protection for Life protection will be reduced at the end of the month during which You reach Your 70th birthday.
- This Contract contains the conditions upon which We will cancel all or a portion of the Protected Balance and/or cancel the Protected Payment and the Program Fee. The terms and conditions which explain how We will cancel all or a part of Your Protected Balance are provided in this Contract.
- This Contract replaces all credit insurance policies and/or certificates, similar payment protection plans, and program contracts You previously entered into with respect to the Loan.

Your signature or authentication below means:

- (a) that You meet the eligibility requirements shown above;
- (b) that Your election above will remain in effect, according to the terms of the Contract, unless subsequently modified;
- (c) that You agree that You have received and thoroughly read the Contract;
- (d) that You agree to pay for and, if We choose to do so, let Us add the Program Fee to Your Loan balance each month, which would subject the Program Fee to finance charges like the rest of Your Outstanding Balance;
- (e) that the Program Fee is subject to change; and
- (f) if the “No Protection” checkbox is marked or if no checkbox is marked in the Options section, You do not have protection.

BORROWER 1 SIGNATURE __________________________ DATE ______

BORROWER 2 SIGNATURE __________________________ DATE ______

For Creditor Use Only: By phone conversation, I hereby represent that the above referenced Borrower has authorized election of the specified option(s) indicated above.

SIGNATURE OF CREDITOR EMPLOYEE __________________________ DATE ______

TIME ______
To qualify for Disability protection, You must:

- meet the definition of Disability for at least 30 consecutive days; and
- not be actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability.

After You have satisfied the waiting period and beginning with the 31st day of Your Disability, We will cancel a minimum of 1 scheduled monthly payment(s). Thereafter, We will continue to cancel Your Scheduled monthly payment for each 30 days, consecutive or non-consecutive, that You are Disabled, up to a maximum of (a) 12 months or (b) $12,000. We will never cancel more than 12 monthly Protected Payments during a 12 month period. The calculation of the 12 month period begins on the date Your benefits begin.

Cancellation of Your Protected Payment will stop the earliest of:

- anytime You have met the definition of Disability for at least 30 consecutive days; or
- anytime You no longer have a Protected Balance; or
- anytime You return to actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability; or
- anytime You no longer qualify for Disability protection; or
- anytime You are deceased.

To qualify for Involuntary Unemployment, You must have lost Your Active Employment:

- because of involuntary layoffs, plant closings, or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control; or
- because of a layoff or plant closing or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control.

A layoff or plant closing means that You involuntarily lose Your Active Employment due to the employer closing a plant or laying off a full-time worker.

If two protected Borrowers die, We will cancel the lesser of the Life amount for each protected Borrower or the Protected Balance.

Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform all of the essential functions of Your occupation at the time Your Disability begins, and You are under the regular care and treatment of a licensed physician, other than You or a family member. If You are not employed when Your Disability begins, Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform the essential functions required of any occupation for which You are reasonably qualified by training, education or experience.

To qualify for Disability protection, You must:

- meet the definition of Disability for at least 30 consecutive days; and
- not be actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability.

To qualify for Involuntary Unemployment, You must have lost Your Active Employment:

- because of involuntary layoffs, plant closings, or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control; or
- because of a layoff or plant closing or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control.

If two protected Borrowers die, We will cancel the lesser of the Life amount for each protected Borrower or the Protected Balance.

Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform all of the essential functions of Your occupation at the time Your Disability begins, and You are under the regular care and treatment of a licensed physician, other than You or a family member. If You are not employed when Your Disability begins, Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform the essential functions required of any occupation for which You are reasonably qualified by training, education or experience.

To qualify for Disability protection, You must:

- meet the definition of Disability for at least 30 consecutive days; and
- not be actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability.

After You have satisfied the waiting period and beginning with the 31st day of Your Disability, We will cancel a minimum of 1 scheduled monthly payment(s). Thereafter, We will continue to cancel Your Scheduled monthly payment for each 30 days, consecutive or non-consecutive, that You are Disabled, up to a maximum of (a) 12 months or (b) $12,000. We will never cancel more than 12 monthly Protected Payments during a 12 month period. The calculation of the 12 month period begins on the date Your benefits begin.

Cancellation of Your Protected Payment will stop the earliest of:

- anytime You have met the definition of Disability for at least 30 consecutive days; or
- anytime You no longer have a Protected Balance; or
- anytime You return to actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability; or
- anytime You no longer qualify for Disability protection; or
- anytime You are deceased.

Involuntary Unemployment means that You involuntarily lose Your Active Employment.

To qualify for Involuntary Unemployment, You must have lost Your Active Employment:

- because of involuntary layoffs, plant closings, or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control; or
- because of a layoff or plant closing or acts of nature, war, revolution, terrorist activity, enemy action, or any other cause beyond Your control.

If two protected Borrowers die, We will cancel the lesser of the Life amount for each protected Borrower or the Protected Balance.

Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform all of the essential functions of Your occupation at the time Your Disability begins, and You are under the regular care and treatment of a licensed physician, other than You or a family member. If You are not employed when Your Disability begins, Disability always means You are unable, because of a medically determined Accident Injury or Sickness, to perform the essential functions required of any occupation for which You are reasonably qualified by training, education or experience.

To qualify for Disability protection, You must:

- meet the definition of Disability for at least 30 consecutive days; and
- not be actively working at any job or combination of jobs paying You an income equal to or exceeding 80% of the income You were earning from Your Active Employment immediately preceding the date You qualified for Disability.
NOTE: An award for unemployment benefits from Your state agency does not guarantee cancellation of Your Protected Payment under this Contract. After You have satisfied the waiting period and beginning with the 31st day of Your Involuntary Unemployment, We will cancel a minimum of 1 scheduled monthly payment(s). Thereafter, We will continue to cancel Your scheduled monthly payment for each 30 days, consecutive or non-consecutive, that You are Involuntary Unemployed, up to a maximum of (a) 6 months or (b) $6,000. We will never cancel more than 12 monthly Protected Payments during a 12 month period. The calculation of the 12 month period begins on the date Your benefits begin.

Protection Activation will not be provided for Involuntary Unemployment resulting from: (a) any Annual, Regularly Scheduled or Seasonal Layoff; (b) any period of unemployment that occurs while You are a Temporary Employee, independent contractor, self-employed or employed by a joint Borrower; (c) retirement; (d) vacation; (e) strike; (f) unionized labor dispute; (g) lockout; (h) termination due to Your Willful or Criminal Misconduct; (i) voluntary unemployment; (j) voluntary loss of wages; or (k) spousal relocation.

Non-protected events

An event will not be protected under this Contract if it:

- is the result of a felony committed by You;
- is caused by results from an atomic explosion or any other release of nuclear energy (except when used solely for medical treatment);
- is the result of an elective cosmetic surgery;
- is the result of an intentionally self-inflicted injury;
- is the result of an assisted suicide or an attempted assisted suicide; or
- occurs prior to the Effective Date of Protection.

A death event will not be protected by Life protection if it:

- occurs within the 6 months immediately following the Effective Date of Protection, and is related to a pre-existing condition for which You received advice, diagnosis, or treatment (including medication) within the 6 months immediately preceding the Effective Date of Protection; or
- is the result of a suicide that occurs within the 12 months immediately following the Effective Date of Protection.

An event will not be protected by Disability protection if it:

- occurs within the 6 months immediately following the Effective Date of Protection, and is related to a pre-existing condition for which You received advice, diagnosis, or treatment (including medication) within the 6 months immediately preceding the Effective Date of Protection; or
- is related to a normal pregnancy; however, complications due to pregnancy or childbirth may be protected if the complications themselves are the cause of the Disability.

An event will not be protected by Involuntary Unemployment protection if it:

- occurs within the 6 months immediately following the Effective Date of Protection.

General Provisions

Changing Your Options. You must provide Us written notice of any request to change Your options. If You add a Protected Event, the Effective Date of Protection for the additional Protected Event is the date You purchased protection for that Protected Event. This will not change the Effective Date of Protection for any previously elected Protected Event(s). If You remove a Protected Event, the termination date is the date You removed protection for that Protected Event, which can never precede the date of Your written notice.

Changing the Terms of this Contract. We reserve the right to change the terms of this Contract and apply those changes to the protection You purchased under this Contract. You will receive notice before any change goes into effect. Your continued payment of the Program Fee will constitute Your acceptance of the change in terms.

Concurrent Protected Events. For each protected Borrower, the amount cancelled will be applied to the dollar and term limitations for each Protected Event. We will never cancel more than the Protected Payment. If You qualify for Disability (original Protected Event) and sustain an additional Sickness or Accidental Injury, which would be in and of itself disabling, the additional Sickness or Accidental Injury will not be considered a new Disability Protected Event, but rather will be considered the same Protected Event. This means that You will receive benefits only if You did not exhaust Your maximum Protected Event benefits in connection with the original Protected Event.

Continued Effectiveness. If any part of this Contract is determined to be unenforceable, it does not affect the validity of the rest of the Contract.

Errors and Adjustments. If We have inadvertently deviated from the terms of this Contract, We will make the necessary adjustments when the error is discovered. If We cancel more benefits than You are entitled to under this Contract, You will remain obligated to pay these amounts to Us within 30 days of receipt of written notification from Us as if no cancellation occurred.

Loan Obligation. Protection under this Contract does not affect, alter, or otherwise relieve Your obligations under Your Loan with Us. Whether or not You have made a request for Protection Activation, You remain obligated to make payments to Us and to comply with the terms of Your Loan.

Loan Obligation After a Protected Event. During the time it takes to process Your Protection Activation, You remain responsible for making at least the minimum required Loan payment due on the Loan by the payment due date. If the minimum required Loan payment due is greater than the Protected Payment, You are responsible for paying the difference to Us. Upon approval of Your Protection Activation, We will refund to You or credit to Your account any Loan payments You made during the processing period that were eligible for cancellation.

Misstatement of Material Fact. If We find that You provided false or inaccurate information We reserve the right to terminate Your protection. If a Protection Activation has been filed, the Protection Activation will be denied.

Past Events. This Contract does not protect You from events that occurred before You purchased protection.

Proof of a Protected Event. You must notify Us or Our Administrator of a Protected Event as soon as possible. You are responsible for providing, and continuing to provide, all the information required by Us to determine qualification for Protection Activation for the Protected Event. If You fail to provide all the information required by Us to verify Your continued qualification for Protection Activation We will not cancel all or a portion of the interest, Protected Payment, Program Fee, or Protected Balance. All information must verify the Protected Event to Our satisfaction. We will only make cancellations if You have a Protected Balance at the time of the Protected Event.

Recurrence of Same or Related Protected Events. If the same type of Protected Event occurs again within 1 year after You have recovered or returned to Active Employment, We will treat this as one Protected Event subject to the initial Protected Event’s terms and conditions, including, but not limited to the maximum number of cancellations for the initial Protected Event. No additional benefits will be activated once You have reached any of the initial Protected Event’s maximums. For Disability, this only applies if You suffer a Disability due to the same condition.
If the same type of Protected Event (for Disability the same condition) occurs again more than 1 year after You have recovered or returned to Active Employment, We will consider it a new Protected Event and You will need to satisfy all requirements to qualify for Protection Activation. This provision applies whether You return to Active Employment with the same or a different employer.

TAX IMPLICATIONS. You may be subject to federal, state, and local taxes on the amount of Your cancelled Protected Payment or Protected Balance. You should consult Your tax advisor. We or Our Administrator will not provide You with guidance on the tax implications, if any, of a cancelled debt.

TERMINATION OF PROTECTION. You may terminate protection on Your account(s) at any time by providing Us with written notice at least 5 business days prior to the requested termination date. If You do so within 30 days of purchasing protection, We will credit You for any Program Fees charged for the protected account(s). We will credit You for any Program Fees You paid for the period after Your protection terminates. Termination will not affect benefits for a Protected Event that occurred prior to the termination date as long as an Outstanding Balance remains on the protected account(s).

Your protection will automatically terminate:
- on the last day of the month during which Your Loan and/or Program Fee is 3 months or more delinquent or past due; or
- if We give You written notice at least 30 days in advance of the termination (or as required by law).

Contact Us with any questions on this Contract.

Completed form can be submitted in person or returned to:
BECU MS 1080-2, PO Box 97050, Seattle, WA 98124-9750