



**PETERSEN**  
INTERNATIONAL UNDERWRITERS

Insured: MONIQUE MOUNDY-RIVES Certificate #: 1797545

Carrier: Lloyd's of London Expiry Date: 12/15/2017

This is a reimbursement only plan.

**LLOYD'S**

Benefits are not assignable without approval.

HOC730-05



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Please submit all claims to:

**Disability Management Services, Inc.**  
1350 Main Street, Suite 1600  
Springfield, MA 01103  
Fax: (844) 611-4719  
E-Mail: STMMClaims@di-mgmt.com  
Phone: (844) 304-3550

Written notice of claim must be given within 20 days, or as soon as reasonably possible after suffering a loss. When we receive a notice, we will furnish a claim form for filing. Written proof of loss must be given within 90 days after a loss. Benefits will cease upon the expiry date, unless you are undergoing in-patient hospitalization, in which case benefits will continue up to 30 days after the expiry.

HOC730-05