

**ATTACHMENT 3**  
**ITN 2014 GROUP VISION INSURANCE**



A Mutual Company Incorporated in 1909  
PO Box 1191 • Madison, WI 53701-1191

Administrative Office: National Vision Administrators, LLC  
1200 Rt 46 West, 2<sup>nd</sup> Floor, Clifton, NJ 07013

**Policy Modifications**

**Policy Modifications:** Policy/Certificate Number NVAI8762, Form #NVIGRPLG 07/12FL is amended as follows:

The renewal period is January 1, 2020 to December 31, 2020.

New premium rates as a result of this change are:

\$5.22	Employee only
\$9.40	Employee plus Spouse
\$9.94	Employee plus child
\$9.94	Employee plus children
\$15.68	Family

In all other respects, the Policy/Certificate remains the same.

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**RIDER:** This rider, issued January 1, 2020, forms a part of Policy/Certificate No. NVAI8762 issued to SOUTHWEST FLORIDA WATER MGMT DISTRICT. It is effective January 1, 2020. 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 Company**

A handwritten signature in cursive script that reads "Kimberly A. Shaul".

Kimberly A. Shaul, Secretary

A handwritten signature in cursive script that reads "Knut A. Olson".

Knut A. Olson, President