



Metropolitan Life Insurance Company
200 Park Avenue, New York, New York 10166

CERTIFICATE CONFIRMATION STATEMENT

Policyholder: Trustees of California's Valued Trust

Group Policy No. 145324-1-G

THIS CONFIRMATION STATEMENT MUST BE ATTACHED TO THE CERTIFICATE PROVIDED BY METLIFE IN ORDER FOR THE CERTIFICATE TO BE VALID. PLEASE READ THE ATTACHED CERTIFICATE CAREFULLY. INSURANCE BENEFITS MAY BE SUBJECT TO CERTAIN REQUIREMENTS, LIMITATIONS AND EXCLUSIONS.

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| Employer Name: | Nevada Joint Union High School District |
| | Management |
| Employer Address: | 11645 Ridge Road, Grass Valley, CA 95945 |
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| Effective Date of this Confirmation Statement: | 07/01/2018 |
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| Personal Benefits Eligibility Date: | First day of the calendar month following the date of employment. |
| | |
| Work Schedule: | As defined by the bargaining agreement/contract |
| | |
| Basic Life Insurance Coverage Amount: | \$70,000.00 |