

BEATRICE FOODS CO.

TRAVEL ACCIDENT PLAN FOR

FULL-TIME SALARIED
AND SALES EMPLOYEES

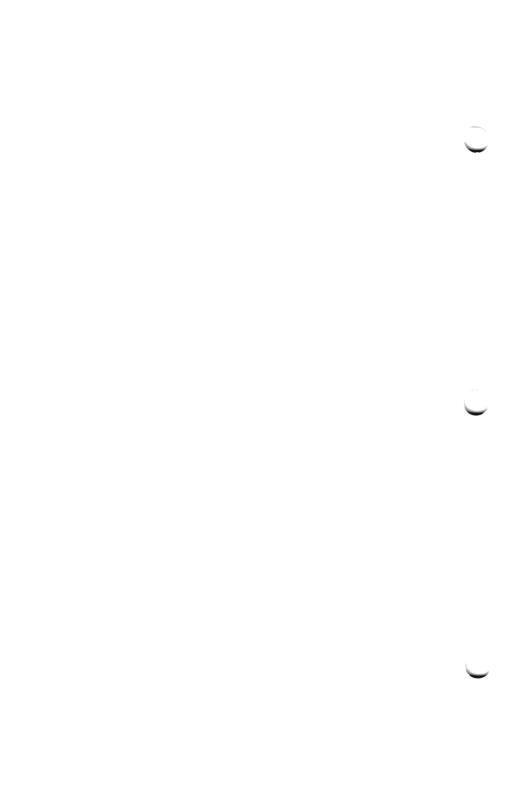


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YOUR TRAVEL ACCIDENT PLAN

Your family's standard of living would probably be greatly changed if you were to die without any survivor protection or be seriously injured in an accident. As part of your Benefits Program, Beatrice Foods has included this Plan to help provide some financial security for your family in the event of your accidental death or dismemberment while traveling on Company business.

Beatrice offers this protection at no cost to you. If you should have a question on any part of this Travel Accident Plan, please see your personnel representative.

GENERAL INFORMATION WHO IS ELIGIBLE?

If you are a regular, full-time salaried employee, Company Officer or Salesman, you are eligible for this protection. Reduced coverage is available for salaried employees between ages 65 and 72. Your coverage will begin on the first of the month after you begin your employment.

If you are not actively at work on the day your coverage is to begin, you will be covered as of the day you return to full-time work with the Company.

WHO PAYS FOR THE PLAN?

Your Travel Accident Plan protection is provided by Beatrice. There is no charge to you for this coverage.

YOUR TRAVEL ACCIDENT BENEFITS HOW MUCH COVERAGE DO I HAVE?

The amount of your Travel Accident coverage is as follo	WS:
Corporate Officers under age 65\$	100,000
Other Officers, Salesmen, and Salaried Employees	
under age 65\$	
Salaried Employees age 65 to 72\$	25,000

WHEN ARE BENEFITS PAYABLE

Benefits under this Plan are payable in case of accidental death or dismemberment while you are travelling on Company business either in a Company-sponsored or private vehicle. This coverage is extended to you 24 hours a day.

If your death should occur as the result of an accident, your beneficiary will be paid the full amount of your coverage. This protection is in effect from the time you leave your home or office until the time you return from your trip.

The same conditions apply for an accidental dismemberment. Should you lose two limbs or eyes, or any two of these members, you will be paid the full amount of your coverage. If you lose one limb or eye, your benefit will be one half the amount of your coverage.

Exceptions and Limitations

Benefits will not be paid in case of one of the following:

- suicide or attempted suicide, while sane or insane
- self-inflicted injuries
- war or act of war, declared or undeclareds.
- accident occurring while you are serving in the Armed Forces of any country
- accident occurring while you are serving as operator or crew member of any aircraft.

Naming a Beneficiary

Benefits from this Plan are payable to the beneficiary you named under your Group Life Insurance Plan, unless you notify your personnel representative otherwise in writing.

If you do not name a beneficiary, or your beneficiary dies before you, death benefits under this Plan will be paid to the first survivor of the following:

- your spouse
- your children
- your parents
- your brothers or sisters
- your nieces or nephews
- the executor or administrator of your estate

HOW DO I APPLY FOR BENEFITS?

You or your beneficiary must apply for payment of your benefits through your personnel representative. Do this as soon as possible after your accident. This person will advise you of the procedure to follow for payment of benefits.

If your claim for benefits is denied, in part or whole, you will receive a written explanation of the specific reasons for this denial. Should you ever be denied benefits for which you feel you are entitled, please contact your Company General Manager.

Within 60 days after a claim has been denied, you may file a written appeal with the Office of the Manager, Employee Benefits of Beatrice Foods Company. Send a copy of your appeal to the Life Insurance Company of North America, Philadelphia, Pennsylvania. Within 30 days, you may file a written request for a hearing with the Manager, Employee Benefits of Beatrice Foods Company.

If you are still dissatisfied with the results of your appeal, the agent for serving legal process is:

Life Insurance Company of North America Contract ABL 63-13-22 Philadelphia, Pennsylvania

WHEN DOES MY COVERAGE END?

Your coverage under the Travel Accident Plan will end in case of one of the following:

- you enter the Armed Forces of any country
- your retirement
- the date you terminate your employment with the Company
- you attain age 72
- the Company no longer offers this group coverage

OTHER INFORMATION ON YOUR TRAVEL ACCIDENT PLAN WHO ADMINISTERS THE PLAN?

Your Travel Accident Plan is administered according to a contract between Beatrice Foods and the Insurance Company of America. The Plan Administrator is the Manager, Employee Benefits of Beatrice Foods Co. Should you wish to contact your Plan Administrator for any reason, you may do so by writing or phoning:

> Manager, Employee Benefits Beatrice Foods, Co. 2 LaSalle Street Chicago, Illinois 60602 phone: 312-782-3820

Assets for payment of Plan benefits are accumulated through the Federal Insurance Company.

For purposes of administering this Plan, records are kept on a calendar year basis. This means the Plan year begins on January first and ends each December 31st.

Plan Documents

You may want to review the complete Plan description from the original text, the latest full annual report of the Plan or other original materials pertaining to the Plan. The Company will make copies of these texts available to you through your personnel representative.

If you would like to have a copy of a document for your own files, you may contact your personnel representative for this material. You may be charged for the cost of actual reproduction.

You will also receive the following additional information:

- changes in your Plan as these may occur from time to time
- a completely updated summary description of your Plan every fifth year, to include all changes made since you first received your booklet
- if no Plan changes are made through the years, you will still receive a complete summary of your Plan every tenth year.

Beatrice Foods always has and will continue to comply with all legal requirements concerning disclosure of your rights as a participant in the Benefit Program. Since the Company is sincerely interested in the communication of these rights, you will always be advised of the effects of plan changes on your rights as a member of these plans.

If there is anything in this booklet that is not clear, please see your personnel representative for a clearer explanation.

YOUR RIGHTS UNDER THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974

As a participant in the Beatrice Foods Co. Weekly Income Plan, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all plan participants shall be entitled to:

- Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites and union halls, all plan documents, including insurance contracts, collective bargaining agreements and copies of all documents filed by the plan with the U.S. Department of Labor, such as detailed annual reports and plan descriptions.
- Obtain copies of all plan documents and other plan information upon written request to the plan administrator. The administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

 Obtain a statement telling you whether you have a right to receive a benefit. This statement must be requested in writing and is not required to be given more than once a year. The plan must provide the statement free of charge.

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your plan, called "fiduciaries" of the plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries.

No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a benefit for this plan or exercising your rights under ERISA.

If your claim for a benefit is denied in whole or in part you must receive a written explanation of the reason for the denial. You have the right to have the plan review and reconsider your claim.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request materials from the plan and do not receive them within 30 days, you may file suit in a federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to \$100 a day until you receive the materials unless the materials were not sent because of reasons beyond the control of the administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or federal court. If it should happen that plan fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a federal court.

The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

If you have any questions about your plan, you should contact the plan administrator. If you have any questions about this statement or about your rights under ERISA, you should contact the nearest Area Office of the U.S. Labor-Management Services Administration, Department of Labor.

