Salary Sick Pay Program

The Campbell Soup Company Salary Sick Pay Program (the “Program”) is designed to provide you with income protection if you are unable to work because of a non-occupational injury or illness, including pregnancy. As an eligible salaried employee, you are automatically covered under the Program, which is provided by Campbell. Your length of service with Campbell determines the benefit amount you receive. MetLife administers the Program and benefits are paid by Campbell.

This section explains how the Program works, including your coverage under the Program if you qualify for benefits.

Right to Amend

Campbell reserves the right to amend, modify (including cost of coverage), reduce or curtail benefits under, or terminate this plan at any time for any reason. In addition, the plan does not represent a vested benefit.

Campbell also reserves the right to amend any of the plans and policies, to change the method of providing benefits, to curtail or reduce future benefits, or to terminate at any time for any reason, any or all of the plans and policies described in this Guide. Neither this Guide nor the benefits described in this Guide create a contract of employment or a guarantee of employment between Campbell and any employee.

Additional Important Information

Be sure to read the About This Guide and Plan Administration sections for more important details about the program and this description.
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Eligibility

If you are a salaried employee regularly scheduled to work at least 20 hours per week, you are eligible to participate in the Program on your first day of employment.

You are not eligible to participate in the Program if you are:

- An hourly employee;
- An employee who is regularly scheduled to work less than 20 hours per week;
- An employee of a leasing company or temporary employment agency; or
- An individual who performs services for Campbell as an independent contractor, consultant, or other designation, irrespective of whether such individual is treated as an employee under common-law employment practices.

Your Regularly Scheduled Work Week

For benefits-eligibility purposes, your regularly scheduled work week is based on your regular work schedule, not the actual hours you work. If your regularly scheduled work week changes, your eligibility to participate in the Program may change.

Cost of Coverage

Campbell pays the full cost of your coverage under the Program.

When Coverage Begins

Your coverage under the Program begins on the date you become eligible (see "Eligibility" above) provided you are actively at work. If you are not actively at work on the date your coverage under the Program is scheduled to take effect, your coverage will not become effective until you return to active work.

You are automatically covered under the Program when you are both eligible and actively at work.

Actively at Work

You will be considered to be "actively at work" if you are performing the material duties of your job on a regularly scheduled workday. You will be considered actively at work on a scheduled non-working day, if you were actively at work on your last scheduled working day.

When Coverage Ends

Generally, your coverage under the Program ends on the earliest of the following dates:

- The date you are no longer actively at work because you have been laid off, are on any leave of absence other than an approved medical leave, or your employment with Campbell ends (whether voluntary or involuntary);
- The day you die; or
- The day Campbell discontinues the Program.

With the exception of an approved medical leave, you do not have coverage under the Program if you are not actively at work. This means that if you are on any leave, other than an approved medical leave, or if you have been laid off or terminated from employment, you do not have coverage under the Program.
How the Program Works

The Program will provide you with a benefit payment if you have a health-related absence due to a non-occupational injury or illness and your absence has been certified. A health-related absence of up to seven consecutive days will be certified when you provide proof of medical care upon your return to work. A health-related absence of more than seven consecutive days must be certified by MetLife.

Once your health-related absence has been certified under the Program, benefit payments will be made each pay period, if you are disabled, for up to a maximum duration of 26 weeks. If your disability extends beyond 26 weeks, you may be eligible for benefits under the Long-Term Disability (LTD) Plan.

Days Counted Towards Absence

In counting days of absence, the Program counts consecutive calendar days, not only work days. For example, if you do not work on Friday or the following Monday, you have been absent for four consecutive days.

The Program provides you with a disability benefit payment of 100% or 50% of your base pay depending upon your years of service as follows:

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<th>Length of Service</th>
<th>What the Program Pays</th>
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<tr>
<td></td>
<td>100% of Base Pay for up to:*</td>
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<tr>
<td>Less than 2 years</td>
<td>8 weeks</td>
</tr>
<tr>
<td>2 but less than 4 years</td>
<td>12 weeks</td>
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<tr>
<td>4 but less than 6 years</td>
<td>16 weeks</td>
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<tr>
<td>6 but less than 8 years</td>
<td>20 weeks</td>
</tr>
<tr>
<td>8 but less than 10 years</td>
<td>24 weeks</td>
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<tr>
<td>10 or more years</td>
<td>26 weeks</td>
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* Includes your first seven days of absence.

** If you are covered by your state’s or commonwealth’s short-term disability benefit laws (e.g., California, Hawaii, New Jersey, New York, Rhode Island and Puerto Rico) and higher benefits are required by law than are provided by the Campbell Salary Sick Pay Program, you will receive the greater amount. But, in no event will you receive more than 100% of your base pay from all sources. State-mandated benefit amounts will be paid, if greater.

Occurrence

If proof of medical care is not provided for a health-related absence of up to seven consecutive days, that absence is considered an “occurrence”. You will not be paid benefits for any occurrences beyond three in a calendar year.

Definition of Disability

You are considered disabled if due to a non-occupational injury or illness you are unable to perform the material duties of your occupation and you are receiving appropriate care and treatment from a doctor on a continuous basis.
**Appropriate Care and Treatment**

In order for care and treatment to be considered appropriate, it must meet the following criteria:

- It is received from a doctor whose medical training and clinical experience are suitable for treating your disability;
- It is necessary to meet your basic health needs and is of demonstrable medical value;
- The type, frequency and duration of treatment is consistent with relevant guidelines of national medical, research and health care coverage organizations and governmental agencies;
- It is consistent with the diagnosis of your condition; and
- Its purpose is maximizing the improvement of your health.

A doctor is a person who is legally licensed to practice medicine and is not related to you. A licensed medical practitioner will be considered a doctor if applicable state law requires that such practitioners be recognized for the purposes of certification of the disability and the care and treatment provided by the practitioner is within the scope of his or her license.

**What Is Your Occupation?**

For purposes of the Program, your occupation is the activity you regularly perform that serves as your source of income. It is not limited to the specific position you hold with Campbell. It may be a similar position, which entails substantially similar functions that could be performed with Campbell or any other employer. To determine your qualification for benefits, MetLife Disability will look at your occupation as it's normally performed in the industry as well as how work tasks are performed for Campbell at a specific location.

**How Benefits Are Paid**

If your disability claim is approved, salary sick pay benefits will be paid each pay period as long as you continue to meet the definition of disability. Your benefit check will be issued to you in the same manner as your pay (i.e., either mailed to you at your address as reflected on Campbell’s payroll records or directly deposited to the financial institution you elected).

In some states with short-term disability (STD) benefit laws (e.g., California) the state-mandated disability benefit you receive will be an offset to the benefits provided under the Program. In other states with STD laws (e.g., New Jersey) if the state-mandated disability amount is greater than the salary sick pay benefit amount, you will receive payment for that difference from MetLife.

**Tax Treatment of Benefits:** In general, the benefit payments you receive under the Program are taxable, and generally are treated the same as regular wages. You may want to consult with your tax advisor regarding the proper federal, state, and local income tax treatment of Program benefit payments.

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**Base Pay**

For the purposes of the Program, your base pay is your base salary immediately prior to the date you became disabled. Base pay excludes overtime pay, awards, commissions, bonuses and any other special compensation received from Campbell and sources other than Campbell.
When Benefit Payments End

Your salary sick pay benefit payments will end on the earliest of the following dates:

- The end of the maximum duration, which is 26 weeks;
- The date you are no longer disabled;
- The date you fail to provide MetLife with:
  - Proof of disability,
  - Evidence of continuing disability,
  - Proof that you are under the appropriate care and treatment of a doctor,
  - Information about other income benefits, or
  - Any other material information related to your disability which may be requested by MetLife.
- The day you die; or
- The date you fail to attend a medical examination requested by MetLife.

New or Recurring Disabilities

If a new disability occurs while you are receiving salary sick pay benefits, the new disability will be treated as part of the same period of disability. Benefits will continue while you remain disabled. The 26-week maximum benefit duration is based on the initial date of disability.

If you return to work after a certified absence and become disabled again due to the same condition before performing the full duties of your occupation for 30 calendar days, your second certified absence will be considered a continuation of your first disability.

Early Return to Work Program

The Early Return to Work (ERTW) Program is a feature which allows qualifying participants to gradually resume full pre-disability job responsibilities in a supportive and monitored environment. The ERTW Program is administered on a case-by-case basis at the sole discretion of Campbell.

If you participate in the ERTW Program, you will receive salary sick pay benefits at your applicable benefit level or your prorated salary for time worked, whichever is greater. In no event will you receive more than 100% of your pre-disability base pay.

To participate in the ERTW Program, all of the following must approve:

- You;
- Your attending physician;
- Your supervisor;
- Your MetLife Case Manager;
- The Human Resources Department; and
- The Medical Department at your location, if applicable.
Employee Qualification

You may identify yourself as a potential candidate for the ERTW Program, or you can be identified by your MetLife Case Manager, your supervisor, the Human Resources Department, and/or the Medical Department. The criteria used to determine if you are appropriate for the program includes, but is not limited to:

- Your medical diagnosis, prognosis, and treatment plan;
- The length of expected absence for your condition;
- Your functional capabilities and motivation to return to work; and
- Your position and actual job responsibilities.

Once identified as a potential candidate, your MetLife Case Manager is the focal point for the development of the ERTW Program. To qualify, you must agree to the ERTW plan, and:

- Be able to work a minimum of 20 hours each week,
- Be able to transition to a full work schedule, with or without reasonable accommodations, generally within 8 weeks, and
- Receive approval from MetLife, your attending physician, the Human Resources Department, your supervisor, and the Medical Department at your location, if applicable.

Claiming Benefits

Your Role and Responsibilities

In order to receive salary sick pay benefits, you are responsible for the following actions:

**You must call your supervisor on the first day of any absence.** For an absence of up to seven consecutive calendar days, upon your return to work, provide your Proof of Medical Care to the occupational health nurse or other person designated by Human Resources at your location in order for your absence to be certified.

**You must call MetLife Disability if you expect your absence will last longer than seven consecutive days.** The MetLife number to call is 1-800-330-5249. You should call MetLife Disability as soon as you expect that your absence will last more than seven days.

When you call MetLife Disability, a representative will ask you for some general information (e.g., your name, your supervisor’s name and your doctor’s name). Once this information is provided, your disability claim will be assigned to a disability case manager who will contact your doctor and notify Campbell to pay salary sick pay benefits once your disability is certified (meaning once it is determined, based upon objective medical facts from your physician concerning your illness or injury, that you are disabled). If you do not call MetLife Disability as required, you are not eligible to receive benefits.

**You must give your doctor a copy of the Authorization to Release Medical Information Form, which MetLife Disability will mail to you after you call them.**

Your signature on this form authorizes your doctor to release medical information to MetLife Disability. Once this form is completed, the original form must be returned to MetLife Disability and a copy should be given to your doctor. If you delay in giving your doctor a copy of this signed form, you may experience a delay in receiving your salary sick pay benefit payment.

It is your responsibility, not that of MetLife or Campbell, to ensure that the necessary medical information is provided to MetLife by your physician.
MetLife’s Role and Responsibilities

In order for salary sick pay benefits to be paid beyond seven consecutive days, MetLife Disability must first certify that you are disabled and that your disability began while you were covered under the Program. MetLife Disability is responsible for coordinating the tracking and management of:

- All health-related absences;
- Certification of eligibility for benefits beyond the first seven consecutive days of disability under the Program;
- Return to work; and
- Transition to LTD benefits, in the event that your disability extends beyond the 26-week maximum duration.

MetLife Disability Case Manager

The Disability Case Manager will be assigned to you by MetLife. The Disability Case Manager handles all required paperwork, focuses on your recovery, and looks for opportunities that will help you return to work and normal activity.

Your Disability Case Manager is the central link between you, your supervisor and your doctor. Your Disability Case Manager will speak with you to collect additional details about your medical condition and your job responsibilities. Then, they will communicate with your supervisor (or another Campbell representative) and your doctor to determine an appropriate length of absence as well as establish a date when you can safely return to work. **Please Note: In discussions with your supervisor, the Disability Case Manager will not disclose your confidential medical information.**

Both you and Campbell will receive notification of your length of disability certification. During this time, your Disability Case Manager remains in contact with you and your doctor, and monitors your progress. If it is necessary to adjust the certified length of disability, your Disability Case Manager will consult with you and your doctor and send re-certification notices to all parties.

When You Can Return to Work

Your Disability Case Manager will monitor your recovery, medically manage your claim for appropriate return to work, and will notify Campbell of the return to work date determined by your physician based on the medical information in the file. When you are released by your treating physician to return to work, you must give proof of your release to return to work to the occupational health nurse or other person designated by Human Resources at your location before you return to work.

If your claim is not approved, you will receive a letter stating the reason(s) for the denial and outlining the process for appealing your claim.

Questions on Your Claim

Call the MetLife Claim Response Center at 1-800-330-5249 if you have general questions about your claim and/or the status of your claim. Representatives from the Claim Response Center are available to assist you with your questions and can transfer you to your Disability Case Manager if needed.