Cell phones have become an everyday necessity for the average person, which means if your cell phone is damaged or stolen, getting it repaired or replaced is not optional.

Fortunately, Cellular Telephone Protection is available which provides coverage for damage to, theft of, or involuntary and accidental parting of your cell phone. An involuntary and accidental parting is the unintended separation from your cell phone when its location is known, but recovery is impractical to complete. This benefit is available if you are a valid cardholder of an eligible U.S. issued card enrolled in the Cellular Telephone Protection benefit and you charge your monthly cellular wireless phone bills to your eligible card for the billing cycle before the month in which the incident occurs. Eligible cell phones are the lines listed on your most recent cellular wireless service provider’s (“cell phone provider”) monthly billing statement for the billing cycle prior to when the incident occurred.

What is covered?

This benefit is supplemental coverage, which means that it will reimburse you for theft of, damage to or involuntary and accidental parting of your cell phone not otherwise covered by another insurance policy (for example; cell phone insurance programs, or your homeowner’s, renter’s, automobile, or employer’s insurance policies).

If you do have personal insurance that covers theft, damage or involuntary and accidental parting for your cell phone, this benefit reimburses you for the deductible portion of your cell phone insurance.

If you do not have personal insurance, the benefit reimburses you for the covered theft, damage, or involuntary and accidental parting for your cell phone.

Once all other insurance has been exhausted, Cellular Telephone Protection will provide coverage up to $500 per claim with a maximum of two (2) claims and $1,000 per twelve (12) month period. If it is determined that your cell phone requires replacement due to the theft of, damage to or an involuntary or accidental parting of the device, you will receive the replacement value subject to the fifty dollar ($50.00) deductible and the benefit maximum. The replacement value is the lesser of your cellular wireless service provider’s suggested retail value of a similar model replacement cell phone or the actual cost to replace the cell phone.

If your cell phone is repairable, you will receive an amount as determined by the diagnostic to repair the cell phone subject to the benefit maximum and fifty-dollar ($50.00) deductible.

Note: Electronic issues, such as inability to charge, mechanical or battery failure, where there is no evidence of physical damage, are not covered under this program.

When does it apply?

Cellular Telephone Protection applies when you make your monthly cellular wireless phone bill payment with your eligible card. Coverage begins the first day of the calendar month following a payment of the cellular wireless phone bill.

If you fail to make a cellular wireless phone bill payment in a particular month, your coverage will be suspended. Coverage will resume on the first day of the calendar month after the date of any future cellular wireless phone bill payment made with the eligible card.

If your cell phone is stolen as a result of criminal activity, you must file a police report within forty-eight (48) hours of the event.
Cellular Telephone Protection (continued)

What is not covered?
This benefit will not provide reimbursement for the following:

- Cell phone accessories other than standard battery and/or standard antenna provided by the manufacturer
- Cell phones purchased for resale, professional, or commercial use
- Cell phones that are lost or "mysteriously disappear," meaning that the phone vanished in an unexplained manner without evidence of a wrongful act by a person or persons
- Cell phones under the care and control of a common carrier (including, but not limited to, the U.S. Postal Service, airlines, or delivery service)
- Cell phones stolen from baggage unless hand-carried and under Your personal supervision, or under supervision of Your traveling companion
- Cell phones which have been rented, borrowed or are part of pre-paid or "pay as you go" type plans
- Cosmetic damage to the cell phone or damage that does not impact the cell phone’s capabilities and functionalities
- Damage or theft resulting from abuse, intentional acts, fraud, hostilities of any kind (including, but not limited to, war, invasion, rebellion, or insurrection), confiscation by the authorities, risks of contraband, illegal activities, normal wear and tear, flood, earthquake, radioactive contamination, or damage from inherent product defects
- Damage or theft resulting from misdelivery or voluntary parting with the cell phone
- Taxes, delivery and transportation charges, and any fees associated with the cellular wireless service provider
- Losses caused by or resulting from a Cyber Incident

How to file a Cellular Telephone Protection claim
1. Within sixty (60) days of the date of the damage or theft, notify the Benefit Administrator at 1-866-894-8569 or outside the U.S. call collect at 1-303-967-1096. The Benefit Administrator will ask You some preliminary questions and send You the appropriate claim form. Please note, if You do not notify the Benefit Administrator within sixty (60) days after the damage or theft, Your claim may be denied.
2. Return the completed, signed claim form and the requested documentation below within ninety (90) days of the date of the damage or theft to the address provided by the Benefit Administrator.

For faster filing, or to learn more about Cellular Telephone Protection, visit www.cardbenefitservices.com

Please submit the following documents:

- The completed signed claim form
- A copy of Your cellular wireless service provider billing statement demonstrating that the entire monthly payment for the cellular wireless phone bill was made the month prior to the date of damage or theft and has been paid with the eligible card.
- If Your cellular wireless service provider’s billing statement doesn’t show payment with the eligible card, a copy of Your card monthly billing statement that corresponds with the above cellular wireless phone monthly billing statement
- A copy of the device summary page from Your cellular wireless phone bill or other sufficient proof of the claimed cell phone model linked to Your cell phone account
- If the claim is due to theft or criminal action, a copy of the police report filed within forty-eight (48) hours of the event
- Based on the details of the claim, the Benefits Administrator may request additional verification including:
  - An itemized repair estimate from an authorized cell phone repair facility
  - The damaged cell phone, for evaluation of its damage
  - An itemized store receipt for the replacement cell phone
  - Documentation (if available) of any other claim settlement such as Your cellular wireless provider or manufacturer’s insurance settlement (if applicable)
- Based on the nature and circumstances of Your claim, the Benefit Administrator may choose to repair or replace Your cell phone or reimburse You for the lesser of:
  a) Up to $500 after the fifty dollar ($50.00) deductible has been applied to the replacement or repair cost; or
  b) The current cellular wireless service provider’s suggested retail value of a similar model replacement cell phone, or the actual cost to replace it, whichever is lower (not including taxes, delivery and transportation charges or fees associated with the cellular wireless service provider), less Your fifty dollar ($50.00) deductible.
  c) If Your cell phone is repairable, You will receive an amount as determined by the diagnostic to repair the cell phone less Your fifty dollar ($50.00) deductible.
  d) If Your cell phone is repairable, You will receive an amount as determined by the diagnostic to repair the cell phone less Your fifty dollar ($50.00) deductible.
  e) Any other documentation deemed necessary by the Benefits Administrator’s sole discretion, to substantiate Your claim. All claims must be fully substantiated as to the time, place, cause, and purchase price of the cell phone.

How will I be reimbursed?
Depending on the nature and circumstances of Your claim, the Benefit Administrator may choose to repair or replace Your cell phone or reimburse You for the lesser of:

- a) Up to $500 after the fifty dollar ($50.00) deductible has been applied to the replacement or repair cost; or
- b) The current cellular wireless service provider’s suggested retail value of a similar model replacement cell phone, or the actual cost to replace it, whichever is lower (not including taxes, delivery and transportation charges or fees associated with the cellular wireless service provider), less Your fifty dollar ($50.00) deductible.
- c) If Your cell phone is repairable, You will receive an amount as determined by the diagnostic to repair the cell phone less Your fifty dollar ($50.00) deductible.
- d) If Your cell phone is repairable, You will receive an amount as determined by the diagnostic to repair the cell phone less Your fifty dollar ($50.00) deductible.
- e) Any other documentation deemed necessary by the Benefits Administrator’s sole discretion, to substantiate Your claim. All claims must be fully substantiated as to the time, place, cause, and purchase price of the cell phone.

Definitions

- Computer Programs means a set of related electronic instructions which direct the operations and functions of a computer or device connected to it, which enable the computer or device to receive, process, store, retrieve or send data

- Cyber Incident means any of the following acts:
  a) Unauthorized access to or use of Your Digital Data or an Eligible Wireless Cellular Telephone;
  b) Alteration, corruption, damage, reduction in functionality, manipulation, misappropriation, theft, deletion, erasure, loss of use or destruction of Your Digital Data or an Eligible Wireless Cellular Telephone;
  c) Transmission or introduction of a computer virus or harmful code, including ransomware, into or directed against Your Digital Data or an Eligible Wireless Cellular Telephone;
  d) Restriction or inhibition of access to or directed against Your Digital Data or an Eligible Wireless Cellular Telephone;
  e) Computer errors, including human operating error or omission; power failure, surge, or diminution of electronic systems; or mistakes in legitimate electronic code or damage from code installed on an Eligible Wireless Cellular Telephone during the manufacturing process, upgrade process, or normal maintenance.

- Digital Data means information, concepts, knowledge, facts, images, sounds, instructions, or Computer Programs stored as or on, created or used on, or transmitted to or from computer software (including systems and applications software), on hard or floppy disks, CD-ROMs, tapes, drives, cells, data processing devices or any other repositories of computer software which are used with electronically controlled equipment. Digital Data shall include the capacity of an Eligible Wireless Cellular Telephone to store information, process information, and transmit information over the Internet.

- Eligible Cellular Wireless Telephones are the lines listed on your most recent cellular wireless service provider’s (“cell phone provider”) monthly billing statement for the billing cycle prior to when the incident occurred.
Additional provisions for Cellular Telephone Protection

- Signed or pinned transactions are covered as long as You use Your eligible account to secure the transaction.
- You shall do all things reasonable to avoid or diminish any loss covered by this benefit. This provision will not be unreasonably applied to avoid claims.
- If You make any claim knowing it to be false or fraudulent, or in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled.
- Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be voided in any case of fraud, intentional concealment, or misrepresentation of material fact.
- No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought more than two (2) years after the time for giving Proof of Loss. Further, no legal action may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.
- This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide to Benefits will not apply to cardholders whose Accounts have been suspended or cancelled.
- Termination dates may vary by financial institutions. Your financial institution can cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. Indemnity Insurance Company of North America (“Provider”) is the underwriter of these benefits and is solely responsible for its administration and claims. The Benefit Administrator provides services on behalf of the Provider.
- After the Benefit Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Benefit Administrator to the extent of the payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.
- This benefit does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit the provision of insurance, including, but not limited to, the payment of claims.
Auto Rental Collision Damage Waiver (continued)

Examples of expensive or exotic cars are the Alfa Romeo, Aston Martin, Bentley, Corvette, Ferrari, Jaguar, Lamborghini, Lotus, Maserati, Maybach, McLaren, Porsche, Rolls Royce, and Tesla. However, selected models of Audi, BMW, Mercedes-Benz, Cadilac, Infiniti, Land Rover, Lexus, Lincoln, and Range Rover are covered.

An antique car is defined as one that is over twenty (20) years old, or one that has not been manufactured for ten (10) years or more.

Vans are not covered. But those designed as small-group transportation vehicles (seating up to nine (9) people, including the driver) are covered.

If You have questions about a specific vehicle’s coverage or organization where the vehicle is being reserved, call the Benefit Administrator at 1-800-348-8472, or call collect outside the United States at 1-804-673-1164.

Related instances & losses not covered

- Any obligation You assume under any agreement (other than the deductible on Your personal auto policy)
- Any violation of the auto rental agreement or this benefit
- Injury of anyone, or damage to anything, inside or outside the Rental Vehicle
- Loss or theft of personal belongings
- Personal liability
- Expenses assumed, waived, or paid by the auto rental company, or its insurer
- The cost of any insurance, or collision damage waiver, offered by or purchased through the auto rental company
- Depreciation of the Rental Vehicle caused by the incident including, but not limited to, “diminished value”
- Expenses reimbursable by Your insurer, employer, or employer’s insurance
- Theft or damage due to intentional acts, or due to the driver(s) being under the influence of alcohol, intoxicants, or drugs, or due to contraband, or illegal activities
- Wear and tear, gradual deterioration, or mechanical breakdown
- Items not installed by the original manufacturer
- Damage due to off-road operation of the Rental Vehicle
- Theft or damage due to hostility of any kind (including, but not limited to, war, invasion, rebellion, insurrection, or terrorist activities)
- Confiscation by authorities
- Vehicles that do not meet the definition of covered vehicles
- Rental periods that either exceed, or are intended to exceed, fifteen (15) consecutive days, within Your country of residence, or thirty-one (31) days outside Your country of residence
- Leases and mini leases
- Theft or damage as a result of the authorized driver’s and/or cardholder’s lack of reasonable care in protecting the Rental Vehicle before and/or after damage or theft occurs (for example, leaving the car running and unattended)
- Theft or damage reported more than forty-five (45) days* after the date of the incident
- Theft or damage for which a claim form has not been received within ninety (90) days* from the date of the incident
- Theft or damage for which all required documentation has not been received within three hundred and sixty-five (365) days after the date of the incident
- Theft or damage from rental transactions that originated in Israel, Jamaica, the Republic of Ireland, or Northern Ireland
- Losses caused by or resulting from a Cyber Incident

*Not applicable to residents in certain states

Filing a claim

It is Your responsibility as a cardholder to make every effort to protect Your Rental Vehicle from damage or theft. If You have an accident, or Your Rental Vehicle has been stolen, immediately call the Benefit Administrator at 1-800-348-8472 to report the incident, regardless of whether Your liability has been established. Outside the United States, call collect at 1-804-673-1164.

You should report the theft or damage as soon as possible but no later than forty-five (45) days from the date of the incident.

The Benefit Administrator reserves the right to deny any claim containing charges that would not have been included, if notification occurred before the expenses were incurred. Thus, it’s in Your best interest to notify the Benefit Administrator immediately after an incident. Reporting to any other person will not fulfill this obligation.

What You must submit to file a claim

At the time of the theft or damage, or when You return the Rental Vehicle, ask Your car rental company for the following documents:

- A copy of the accident report form
- A copy of the initial and final auto rental agreements (front and back)
- A copy of the repair estimate and itemized repair bill
- Two (2) photographs of the damaged vehicle, if available
- A police report, if obtainable
- A copy of the demand letter which indicates the costs You are responsible for and any amounts that have been paid toward the claim

Submit all of the above documents from the rental company, along with the following documents, to the Benefit Administrator:

- The completed and signed Auto Rental Collision Damage Waiver claim form (Important: This must be postmarked within ninety (90) days* of the theft or damage date, even if all other required documentation is not yet available – or Your claim may be denied).
- A copy of Your monthly billing statement (showing the last 4 digits of the Account number) demonstrating that the entire rental transaction was made on Your eligible Account.
- A statement from Your insurance carrier (and/or Your employer or employer’s insurance carrier, if applicable), or other reimbursement showing the costs for which You are responsible, and any amounts that have been paid toward the claim. Or, if You have no applicable insurance or reimbursement, a statement of no insurance or reimbursement is required.
- A copy of Your primary insurance policy’s Declarations Page (if applicable) to confirm Your deductible (This means the document(s) in Your insurance policy that lists names, coverages, limits, effective dates, and deductibles).
- Any other documentation required by the Benefit Administrator to substantiate the claim.

Finally, please note that all remaining documents must be postmarked within three hundred and sixty-five (365) days* of the theft or damage date or Your claim may be denied.

*Not applicable to residents in certain states.

For faster filing, or to learn more about Auto Rental Collision Damage Waiver, visit www.eclaimsline.com
Extended Warranty Protection

Product warranties can be inconvenient and cumbersome to use. Let's say You purchased a great gadget about a year ago, but it just stopped working, and You can't find Your sales receipt and warranty information. For all too common situations like these, Extended Warranty Protection can help.

Extended Warranty Protection provides You with valuable features that help You manage, use and extend the warranties for eligible items purchased on Your covered Account and/or rewards program associated with Your covered Account. Services include Warranty Registration and Extended Protection. You are eligible for this benefit if You are a cardholder of an eligible card issued in the United States and You purchase either a portion or the entire cost of the item using Your Account and/or rewards program associated with Your covered Account.
Extended Warranty Protection (continued)

Here’s how Warranty Registration works
When You purchase an eligible item that carries a manufacturer’s warranty, You can register Your purchase by calling 1-800-551-8472 or call collect outside the U.S. at 1-303-967-1096. You can also register Your purchase online at www.cardbenefitservices.com.

The Benefit Administrator will tell You where to send Your item’s sales receipt and warranty information, so they can be kept on file should You need them.

If You choose not to register Your item, be sure to keep Your monthly billing statement reflecting the purchase, the itemized sales receipt, the original manufacturer’s written U.S. warranty and any additional warranty in a safe place. These documents will be required to verify Your claim.

Here’s how Extended Protection works
Your warranty coverage can be doubled up to one (1) additional year on eligible warranties of three (3) years or less. For example, a manufacturer’s warranty of three (3) months would be provided with an additional three (3) months of coverage for a combined total of six (6) months of coverage, and a warranty for six (6) months would be provided with an additional six (6) months of coverage for a combined total of twelve (12) months of coverage. However, if the manufacturer’s warranty is for three (3) years, it would only be extended one (1) additional year for a combined total of four (4) years of coverage.

This benefit is limited to no more than the original price of the purchased item (as shown on Your credit card receipt), less shipping and handling fees, up to a maximum of ten thousand dollars ($10,000.00) per claim, and fifty thousand dollars ($50,000.00) per cardholder.

The benefit covers purchases made both inside and outside the U.S. The eligible item must have a valid original manufacturer’s U.S. repair warranty of three (3) years or less, store-purchased dealer warranty, or an assembler warranty.

What Extended Protection does not cover
- Boats, automobiles, aircraft, and any other motorized vehicles and their motors, equipment, or accessories, including trailers and other items that can be towed by or attached to any motorized vehicle
- Any costs other than those specifically covered under the terms of the original manufacturer’s written U.S. repair warranty, as supplied by the original manufacturer, or other eligible warranty
- Items purchased for resale, professional, or commercial use
- Real estate and items which are intended to become part of real estate including, but not limited to, items that are hard-wired or hard-plumbed, garage doors, garage door openers, and ceiling fans
- Rental or lease items
- Computer software
- Medical equipment
- Used or pre-owned items (Refurbished items will be covered as long as it has a warranty with it and would not be considered used or pre-owned.)
- Losses caused by or resulting from a Cyber Incident.
- Medical equipment
- Computer software
- Medical equipment
- Used or pre-owned items (Refurbished items will be covered as long as it has a warranty with it and would not be considered used or pre-owned.)
- Losses caused by or resulting from a Cyber Incident.

Filing an Extended Protection claim
To file a claim, call the Benefit Administrator at 1-800-551-8472 or call collect outside the U.S. at 1-303-967-1096, immediately after the failure of Your covered item. Please note if You do not notify the Benefit Administrator within sixty (60) days of product failure, Your claim may be denied.

The Benefit Administrator will request preliminary claim information, direct You to the appropriate repair facility, and send You the claim form. Gift recipients of eligible items are also covered, but they must provide all the documents needed to substantiate their claim.

If You received or purchased a service contract or an extended warranty when You purchased Your item, this benefit will be supplemental to, and in excess of, that coverage.

What You must submit to file a claim
Fill out and sign the claim form the Benefit Administrator sent You, then submit the form within ninety (90) days of the product failure, along with the following documents:

- A copy of Your monthly billing statement (showing the last four [4] digits of the Account number) demonstrating that the purchase was made on Your eligible Account and/or rewards program associated with Your covered Account
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- A copy of the itemized sales receipt
- A copy of Your monthly billing statement (showing the last four [4] digits of the Account number) demonstrating that the purchase was made on Your eligible Account and/or rewards program associated with Your covered Account
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- A copy of the itemized sales receipt
- A copy of the original manufacturer’s written U.S. warranty, and any other applicable warranty
- A description of the item and its serial number, and any other documentation deemed necessary to substantiate Your claim (this includes bills and, if necessary, a copy of the maintenance record and receipts)
- The original repair estimate or repair bill, indicating cause of failure
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim

All claims must be fully substantiated.

For faster filing, or to learn more about Extended Warranty Protection, visit www.cardbenefitservices.com

How You will be reimbursed
If You have substantiated Your claim and met the terms and conditions of the benefit, Your item will be replaced or repaired at the Benefit Administrator’s discretion, but for no more than the original purchase price of the covered item, as recorded on Your credit card receipt, less shipping and handling fees, up to a maximum of ten thousand dollars ($10,000.00) per claim, and a maximum of fifty thousand dollars ($50,000.00) per cardholder. You will only be reimbursed up to the amount charged to Your Account or the program limit, whichever is less.

Under normal circumstances, reimbursement will occur within five (5) business days of the receipt and approval of all required documents.

If Your item is to be repaired, You may go to an authorized repair facility and file a claim for reimbursement. Only valid and reasonable repairs made at the manufacturer’s authorized repair facility are covered.

In either case, the Benefit Administrator’s payment, replacement, or repair made in good faith will fulfill the obligation under this benefit.

Definitions
Account means Your credit or debit card Accounts.
Extended Warranty Protection (continued)

**Computer Programs** means a set of related electronic instructions which direct the operations and functions of a computer or device connected to it, which enable the computer or device to receive, process, store, retrieve or send data.

**Cyber Incident** means any of the following acts:
- a) unauthorized access to or use of Your Digital Data or a Covered Purchase;
- b) alteration, corruption, damage, reduction in functionality, manipulation, misappropriation, theft, deletion, erasure, loss of use or destruction of Your Digital Data or Covered Purchase;
- c) transmission or introduction of a computer virus or harmful code, including ransomware, into or directed against Your Digital Data or Covered Purchase;
- d) restriction or inhibition of access to or directed against Your Digital Data or Covered Purchase;
- e) computer errors, including human operating error or omission; power failure, surge, or diminution of electronic systems; or mistakes in legitimate electronic code or damage from code installed on a Covered Purchase during the manufacturing process, upgrade process, or normal maintenance.

**Digital Data** means information, concepts, knowledge, facts, images, sounds, instructions, or Computer Programs stored as or on, created or used on, or transmitted to or from computer software (including systems and applications software), on hard or floppy disks, CD-ROMs, tapes, drives, cells, data processing devices or any other repositories of computer software which are used with electronically controlled equipment. Digital Data shall include the capacity of a Covered Purchase to store information, process information, and transmit information over the Internet.

**Eligible Person** means a cardholder who pays for their purchase by using their eligible Account and/or rewards program associated with their covered Account.

**You or Your** means an Eligible Person who purchase their item to their eligible Account and/or rewards program associated with their covered Account.

### Additional provisions for Extended Protection

- Signed or pinned transactions are covered as long as You use Your eligible card to secure the transaction.
- You shall do all things reasonable to avoid or diminish any loss covered by this benefit. This provision will not be unreasonably applied to avoid claims.
- If You make any claim knowing it to be false or fraudulent in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled. Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact.
- No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.
- This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide will not apply to cardholders whose Accounts have been suspended or cancelled.
- Termination dates may vary by financial institutions. Your financial institution can cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. Indemnity Insurance Company of North America ("Provider") is the underwriter of these benefits and is solely responsible for its administration and claims. The Benefit Administrator provides services on behalf of the Provider.
- After the Benefit Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Benefit Administrator to the extent of the payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.
- This benefit does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit the provision of insurance, including, but not limited to, the payment of claims.

**Trip Delay Reimbursement**

Having a Covered Trip delayed can mean more than just lost time; it can also create an additional cost that You weren’t expecting to pay.

Trip Delay Reimbursement covers up to a maximum of three hundred ($300.00) dollars for each purchased ticket, for reasonable additional expenses incurred when a Covered Trip You purchased with Your eligible Account and/or rewards program associated with Your covered Account is delayed for more than twelve (12) hours. The benefit is limited to one claim per Covered Trip. To be eligible for this coverage, You need to purchase either a portion or the entire cost of Your Common Carrier fare using Your Account.

You, Your spouse and Your dependent children under twenty-two (22) years of age are automatically covered when You charge Your Covered Trip’s Common Carrier fare to Your eligible Account and/or rewards program associated with Your covered Account.

This benefit is supplemental coverage, which means that reasonable expenses during the delay not otherwise covered by Your Common Carrier, another party or Your primary personal insurance policy, may be reimbursed up to a maximum of three hundred dollars ($300.00) per ticket. You will be refunded the excess amount once all other reimbursement has been exhausted up the limit of liability.

**What is covered?**

Your reasonable additional expenses, such as meals and lodging, may be reimbursed as long as:

- A portion of the fare was purchased with an eligible Account and/or rewards program associated with Your covered Account
- Your Covered Trip was delayed for more than twelve (12) hours due to Covered Hazards
- Your Covered Trip is a period of travel that does not exceed three hundred and sixty-five (365) days

For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-551-8472 or call collect outside the U.S. at 1-303-967-1096.
Trip Delay Reimbursement (continued)

What is not covered?

- Any delay due to a Covered Hazard which was made public or made known to You prior to Your departure.
- Any pre-paid expenses related to Your Covered Trip, such as tour or activity fees associated with Your Covered Trip.

How to file a Trip Delay Reimbursement claim

Within thirty (30) days of the Covered Trip delay, call the Benefit Administrator at 1-800-840-4735, or call collect outside the U.S. at 1-804-673-7683. The Benefit Administrator will ask You for some preliminary claim information and send You a claim form.

Within ninety (90) days of the date of Your Covered Trip delay, return Your completed and signed claim form and the requested documentation below to the following address: Card Benefit Services, P.O. Box 72034, Richmond, VA 23255

Please submit the following documents:

- A copy of the detailed original and updated travel itinerary and/or the Common Carrier tickets
- A copy of Your monthly billing statement (showing the last four [4] digits of the Account number) confirming the Common Carrier ticket was charged to the covered Account. Only applicable if the travel itinerary does not reflect the last 4 digits of the Account number.
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- Tickets reflecting the total amount charged for the claimed Covered Trip
- A statement from the Common Carrier explaining the reason for the delay
- Copies of itemized receipts for Your claimed expenses. For food expenses, receipts are required, however itemized receipts are only required for bills of fifty dollars ($50.00) or more per covered traveler.
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim

Failure to contact the Benefit Administrator or return the completed claim form and documentation within the time periods indicated above may result in the denial of Your claim.

For faster filing, or to learn more about Trip Delay Reimbursement, visit www.eclaimsline.com

Definitions

Account means Your credit or debit card Accounts.

Common Carrier means any land, water, or air conveyance operating for hire under a valid license for the transportation of passengers and for which a ticket must be purchased prior to commencing travel. Common Carrier does not include taxis, limousine services, or commuter rail or commuter bus lines or rental vehicles.

Covered Trip means a period of travel that does not exceed three hundred and sixty-five (365) days away from the Eligible Person’s residence to a destination other than the Eligible Person’s city of residence for which the Eligible Person charges the cost of transportation by Common Carrier to the Account and/or rewards programs associated with the covered Account.

Covered Hazards means equipment failure, inclement weather, strike and hijacking/skyjacking.

Eligible Person means a cardholder who pays for their Covered Trip by using their eligible Account and/or rewards programs associated with their covered Account.

Family Member means Your spouse or legally dependent children under age twenty-two (22), [twenty-five (25) if enrolled as a full-time student at an accredited university].

You or Your means an Eligible Person or Your Family Members who charged their Covered Trip to Your eligible Account and/or rewards programs associated with Your covered Account.

Additional provisions for Trip Delay Reimbursement

- Signed or pinned transactions are covered as long as You use Your eligible card to secure the transaction.
- You shall do all things reasonable to avoid or diminish any loss covered by this benefit. This provision will not be unreasonably applied to avoid claims.
- If You make any claim knowing it to be false or fraudulent in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled.
- Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact.
- No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought more than two (2) years after the time for giving Proof of Loss. Further, no legal action may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.
- This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide will not apply to cardholders whose Accounts have been suspended or cancelled.
- Termination dates may vary by financial institutions. Your financial institution can cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. Indemnity Insurance Company of North America (“Provider”) is the underwriter of these benefits and is solely responsible for its administration and claims. The Benefit Administrator provides services on behalf of the Provider.
- After the Benefit Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Benefit Administrator to the extent of the payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.
- This benefit does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit the provision of insurance, including, but not limited to, the payment of claims.

For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-840-4735, or call collect outside the U.S. at 1-804-673-7683.
Trip Cancellation and Interruption

Sometimes the unexpected happens and Your travel arrangements don’t go as planned.

You’ve done a great job preparing for Your Trip. Your flights have been booked, You confirmed Your reservation with Your hotel and You even rented a car so You can sightsee. But what if You have to cancel Your trip because of the death of an Immediate Family Member? What if the airline You booked Your flight through declares bankruptcy? Fortunately, Trip Cancellation and Interruption benefits are available to help You with these unforeseen circumstances that could disrupt Your travel plans.

Trip Cancellation and Interruption benefits pay up to $5,000 per Insured Person for the non-refundable Common Carrier ticket(s) that You paid for with Your covered Account and/or rewards programs associated with Your covered Account. You, Your spouse (or Domestic Partner) and Your Dependent Children are eligible for coverage if You charge the entire cost of the Trip using Your Account, less redeemable certificates, vouchers, or coupons, or rewards program associated with Your covered Account.

The Trip Cancellation or Interruption must be caused by or result from:

1. The death, Accidental Bodily Injury, disease or physical illness of You or an Immediate Family Member of the Insured person; or
2. Default of the Common Carrier resulting from financial insolvency.

The death, Accidental injury, disease or physical illness must be verified by a Physician and must prevent You from traveling on the trip.

Note: Common Carriers may issue a credit voucher for the value of the unused ticket. A fee may be associated with changing or cancelling the ticket. Reimbursement of fee may be eligible at time of Loss. Most Common Carrier credit vouchers expire in one year. Proof of unused credit voucher can be submitted for reimbursement after expiration. Payment will not exceed either the actual Non-Refundable amount paid by the Insured Person for a Common Carrier passenger(s) fare(s), or up to $5,000.

The following exclusions apply to financial services Common Carrier Trip Cancellation/Trip Interruption only

No Trip Cancellation or Interruption benefits will be paid for Loss caused by or resulting from:

- A Pre-existing Condition
- Accidental Bodily Injuries arising from participation in interscholastic or professional sports events, racing or speed contests, or uncertified scuba diving
- Cosmetic surgery, unless such cosmetic surgery is rendered necessary as a result of a Loss covered under this policy
- The Insured Person or an Immediate Family Member being under the influence of drugs (except those prescribed and used as directed by a Physician) or alcohol
- The Insured Person or an Immediate Family Member: a) traveling against the advice of a Physician; or b) traveling while on a waiting list for specified medical treatment; or c) traveling for the purpose of obtaining medical treatment; or d) traveling in the third trimester (seventh month or after) of pregnancy
- Suicide, attempted suicide, or intentionally self-inflicted injuries
- Declared or undeclared war, but war does not include acts of terrorism
- An Insured Person’s emotional trauma, mental or physical illness, disease, pregnancy, childbirth or miscarriage, bacterial or viral infection or bodily malfunctions, except physical illness or disease which prevent the Insured Person from traveling on a Covered Trip. This Exclusion does not apply to Loss resulting from an Insured Person’s bacterial infection caused by an Accident or from Accidental consumption of a substance contaminated by bacteria.

How to file a Trip Cancellation or Interruption claim

Within twenty (20) days of the Trip Cancellation or interruption or as soon as reasonably possible, You must provide (written) claim notice to the Plan Administrator. The Plan Administrator will ask You for some preliminary information and send You the appropriate claim forms. Failure to give notice within twenty (20) days will not invalidate or reduce any otherwise valid claim, if notice is given as soon as reasonably possible.

When the Plan Administrator receives notice of a claim, the Plan Administrator will send You forms for giving proof of Loss within fifteen (15) days. If You do not receive the forms, You should send the Plan Administrator a written description of the Loss.

Answers to specific questions can be obtained by writing to the Plan Administrator. To make a claim, please contact the Plan Administrator:

cbsi Card Benefit Services
550 Mamaroneck Avenue, Suite 309
Harrison, NY 10528

Please return Your completed and signed claim form and the documents listed below as soon as possible to the Plan Administrator. For faster filing, to check the status of the claim and securely upload documents visit www.myclaimagent.com/cbs

- A copy of Your monthly billing statement or the travel itinerary (showing the last four [4] digits of the Account number) confirming the Common Carrier ticket was purchased using the covered Account and/or rewards programs associated with Your covered Account.
- If more than one method of payment was used, please provide document- ation as to additional currency, voucher, points or any other payment method utilized.
- Confirmation of the non-refundable amounts for the unused Common Carrier tickets and/or travel vouchers
- Confirmation that the tickets were cancelled with the Common Carrier
- A copy of the travel itinerary showing the passenger names and ticket cost
- Confirmation of the reason for the Trip Cancellation; (completed attached physician statement, confirmation of death of Immediate Family Member or documentation confirming any other cause of Loss)
- A copy of the cancellation or refund policies of the Common Carrier, Tour Operator or Travel Supplier

Travel Accident benefit

As a cardholder, You, Your spouse (or Domestic Partner), and unmarried Dependent Children will be automatically insured up to one thousand dollars ($1,000) for Accidental Loss of life, limb, sight, speech, or hearing. This benefit applies while:

1. Riding as a passenger in or entering or exiting any Common Carrier; or
2. Riding as a passenger in, entering, or exiting any conveyance licensed to carry the public for a fee and while traveling to or from the airport:
   a. Immediately preceding the departure of a Common Carrier on which the Insured Person has purchased passage; and
   b. Immediately following the arrival of a Common Carrier on which the Insured Person was a passenger; or
3. At the airport, terminal or station, at the beginning or end of the Common Carrier Covered Trip.
Trip Cancellation and Interruption (continued)

### Definitions

- **Accident or Accidental** means a sudden, unforeseen, and unexpected event which: happens by chance; is independent of illness and disease and is the direct source of Loss.

- **Accidental Bodily Injury** means Bodily Injury, which: 1) is Accidental; 2) is the direct cause of a Loss; and 3) occurs while the Insured Person is insured under this policy, which is in force.

- **Account** means Your credit or debit card Accounts.

- **Benefit Amount** means the Loss amount at the time the entire cost of the passenger fare is purchased with an eligible Account and/or rewards programs associated with Your covered Account.

- **Loss** means, with respect to a hand, complete severance through or above the knuckle joints of at least four (4) fingers on the same hand or at least three (3) fingers and the thumb on the same hand; with respect to a foot, complete severance through or above the ankle joint. The Company will consider it a Loss of hand or foot even if the fingers, thumb, or foot is later reattached.

### Covered Loss

<table>
<thead>
<tr>
<th>Covered Loss</th>
<th>Benefit Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidental Loss of Life, two or more Members, sight of both eyes, speech and hearing or any combination thereof</td>
<td>$1,000,00</td>
</tr>
<tr>
<td>Accidental Loss of one Member, sight of one eye, speech or hearing</td>
<td>$500.00</td>
</tr>
<tr>
<td>Accidental Loss of the thumb and index finger of the same hand</td>
<td>$250.00</td>
</tr>
</tbody>
</table>

In order to be eligible for this additional coverage, the entire cost of the Common Carrier passenger fare(s), less redeemable certificates, vouchers, or coupons, must be charged to Your covered Account and/or rewards programs associated with Your covered Account during the policy period. If the purchase is not made prior to the Insured Person’s arrival at the airport, coverage begins at the time the entire cost of the Common Carrier passenger fare is purchased.

This travel accident benefit is provided to eligible cardholders. Your financial institution pays the cardholder’s premium as a benefit of the card membership.

The Loss must occur within one year of the Accident. The Company will pay the single largest applicable Benefit Amount. In the event of multiple Accidental deaths per Account arising from any one Accident, the Company’s liability for all such Losses will be subject to a maximum limit of insurance equal to two times the Benefit Amount for Loss of Life. Benefits will be proportionately divided among the Insured Persons up to the maximum limit of insurance.

The Loss of Life benefit will be paid to the Beneficiary designated by You. If no such designation has been made, that benefit will be paid to the first surviving Beneficiary for Loss of life. Benefits will be proportionately divided among the Insured Persons up to the maximum limit of insurance.

The following exclusions apply to the Travel Accident benefit:

- Loss caused by or resulting from:
  - An Insured Person’s emotional trauma, mental or physical illness, disease, normal pregnancy, normal childbirth or elective abortion, bacterial or viral infection, or bodily malfunctions. This exclusion does not apply to Loss resulting from an Insured Person’s bacterial infection caused by an Accident or from Accidental consumption of a substance contaminated by bacteria
  - Suicide, attempted suicide, or intentionally self-inflicted injuries
  - Declared or undeclared war, but war does not include acts of terrorism
  - An Accident occurring while You are in, entering, or exiting any aircraft while acting or training as a pilot or crew member (does not apply if You temporarily perform pilot or crew functions in a life-threatening emergency)

How to file a Travel Accident benefit claim

Within twenty (20) days of the accident or as soon as reasonably possible, You must provide (written) claim notice to the Plan Administrator. The Plan Administrator will ask You for some preliminary information and send You the appropriate claim forms. **Failure to give notice within twenty (20) days will not invalidate or reduce any otherwise valid claim, if notice is given as soon as reasonably possible.**

When the Plan Administrator receives notice of a claim, the Plan Administrator will send You forms for giving proof of Loss within fifteen (15) days. If You do not receive the forms, You should send the Plan Administrator a written description of the Loss.

Answers to specific questions can be obtained by writing to the **Plan Administrator**. To make a claim, please contact the **Plan Administrator**:

cbsi Card Benefit Services
550 Mamaroneck Avenue, Suite 309
Harrison, NY 10528

Please return Your completed and signed claim form and the documents listed below as soon as possible to the **Plan Administrator**:

- A completed medical authorization form for each treating medical facility
- Copy of the certificate of death, if applicable
- A copy of the travel itinerary
- A copy of the credit card statement reflecting the purchase, verification of the cardholder’s name and the first six digits of the credit card number.

To view the status of your claim and to securely upload documents visit www.myclaimsagent.com

Or mail the completed and signed claim form and all required documents to:

Claim Benefit Services
P.O. Box 459084
Sunrise, FL 33345

If You choose to mail Your documents, please send a copy of Your documents and retain the originals for Your records. **Claim Benefit Services is unable to return any submitted documents. You will be contacted by a claim adjuster if additional information or documentation is required**

### How to file a Travel Accident benefit claim

Within twenty (20) days of the accident or as soon as reasonably possible, You must provide (written) claim notice to the Plan Administrator. The Plan Administrator will ask You for some preliminary information and send You the appropriate claim forms. **Failure to give notice within twenty (20) days will not invalidate or reduce any otherwise valid claim, if notice is given as soon as reasonably possible.**

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### Definitions

- **Accident or Accidental** means a sudden, unforeseen, and unexpected event which: happens by chance; is independent of illness and disease and is the direct source of Loss.

- **Accidental Bodily Injury** means Bodily Injury, which: 1) is Accidental; 2) is the direct cause of a Loss; and 3) occurs while the Insured Person is insured under this policy, which is in force.

- **Account** means Your credit or debit card Accounts.

- **Benefit Amount** means the Loss amount at the time the entire cost of the passenger fare is purchased with an eligible Account and/or rewards programs associated with Your covered Account.
Common Carrier means any licensed land, water or air conveyance operated by those whose occupation or business is the transportation of persons or things without discrimination and for hire.

Covered Trip means travel on a Common Carrier when the entire cost of the passenger fare for such transportation, less redeemable certificates, vouchers, or coupons, has been purchased with an Insured Person’s covered card Account and/or rewards programs associated with Your covered Account issued by the Policyholder.

Dependent Child or Children means those Children, including adopted Children and those Children placed for adoption, who are primarily dependent upon the Insured Person for maintenance and support, and who are: 1) under the age of nineteen (19), and reside with the Insured Person; 2) beyond the age of nineteen (19), permanently mentally or physically challenged, and incapable of self-support; or 3) under the age of twenty-five (25) and classified as full-time students at an institution of higher learning.

Domestic Partner means a person who is registered as a Domestic Partner or legal equivalent under laws of the governing jurisdiction, or who: 1) is at least 18 years of age and competent to enter into a contract; 2) is not related to the Primary Insured Person by blood; 3) has exclusively lived with the Primary Insured Person for at least twelve (12) consecutive months. 4) is not legally married or separated; and 5) has with the Primary Insured Person at least two (2) of the following financial arrangements: a) a joint mortgage or lease; b) a joint bank account; c) joint title to or ownership of a motor vehicle or status a joint lessee on a motor vehicle lease; or d) a joint credit card account with a financial institution.

Immediate Family Member means the Insured Person’s: 1) Spouse or Domestic Partner; 2) children including adopted children or stepchildren; 3) legal guardians or wards; 4) siblings or siblings-in-law; 5) parents or parents-in-law; 6) grandparents or grandchildren; 7) aunts or uncles; 8) nieces and nephews. Immediate Family Member also means a Spouse’s or Domestic Partner’s children, including adopted children or stepchildren; legal guardians or wards; siblings or siblings-in-law; parents or parents-in-law; grandparents or grandchildren; aunts or uncles; nieces or nephews.

Insured Person means the individual or entity to whom the Policyholder has issued an Account, as well as authorized users of the Account registered with the Policyholder. Insured Person also means the Insured Person’s Spouse or Domestic Partner and Dependent Children.

Member means hand or foot.

Pre-existing Condition means Accidental Bodily Injury, disease, or illness of the Insured Person or Immediate Family Member of the Insured Person which occurs or manifests itself during the sixty (60) day period immediately prior to the purchase date of a Scheduled Airline passenger fare(s). Disease or illness has manifested itself when either: 1) medical care or treatment has been given; or 2) there exists symptoms which would cause a reasonably prudent person to seek medical diagnosis, care or treatment. The taking of prescription drugs or medication for controlled (continued) condition throughout this sixty (60) day period will not be considered to be a manifestation of illness or disease.

Trip Cancellation means the cancellation of Common Carrier travel arrangements when the Insured Person is prevented from traveling on a Covered Trip on or before the Covered Trip departure.

Trip Interruption means the Insured Person’s Covered Trip is interrupted either on the way to the Covered Trip point of departure or after the Covered Trip departure.

You or Yours means an Insured Person who purchase their trip to the Insured person’s covered Account and/or rewards programs associated with the Insured Person’s covered Account.

Additional provisions for Trip Cancellation and Interruption

As a handy reference guide, please read this and keep it in a safe place with Your other insurance documents.

This description of coverage is not a contract of insurance but is simply an informative statement of the principal provisions of the insurance while in effect. Complete provisions pertaining to this plan of insurance are contained in the master policy, on file with the Policyholder: BNY Midwest Trust Company as trustee of the Chubb Financial Institution Group Insurance Trust for the Account of participating financial institutions. Policy #: 6478-07-74

Signed or pinned transactions are covered as long as You use Your eligible card to secure the transaction.

You shall do all things reasonable to avoid or diminish any Loss covered by this benefit. This provision will not be unreasonably applied to avoid claims.

If You make any claim knowing it to be false or fraudulent in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled. Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact.

No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought more than two (2) years after the time for giving Proof of Loss. Further, no legal action may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.

This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide will not apply to cardholders whose Accounts have been suspended or cancelled.

Termination dates may vary by financial institutions. Your financial institution can cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. Federal Insurance Company (“Provider”) is the underwriter of these benefits and is solely responsible for its administration and claims. The Plan Administrator provides services on behalf of the Provider.

After the Plan Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Plan Administrator to the extent of the payment made to You. You must give the Plan Administrator all assistance as may reasonably be required to secure all rights and remedies.

This benefit does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit the provision of insurance, including, but not limited to, the payment of claims.

For more information about the benefit described in this guide, contact the Plan Administrator.
Lost Luggage Reimbursement

Have you ever been waiting for your checked luggage to come around the belt only to find that it has been lost by your airline?

Fortunately, Lost Luggage Reimbursement is here to help. With Lost Luggage Reimbursement, you can be reimbursed for the difference between the "value of the amount claimed" and the common carrier’s payment up to [insert three thousand dollars ($3,000.00) or five thousand dollars ($5,000.00)] per covered trip (for New York residents, coverage is limited to two thousand dollars ($2,000.00) per bag), provided the checked luggage and/or carry-on baggage and/or its contents was lost due to theft or misdirection by the common carrier. "Value of the amount claimed" is the lesser of the following three amounts: the original purchase price of the item(s), the actual cash value of the item(s) at the time of theft or misdirection (with appropriate deduction for depreciation), and the cost to replace the item(s).

You and your immediate family members are all eligible for this benefit when you take a covered trip and pay for the cost of your common carrier tickets with your covered account or rewards program associated with your covered account. To be eligible for coverage, you must purchase a portion of the entire cost of the covered trip with your covered account and/or rewards program associated with your covered account. Only your checked luggage and/or carry-on baggage and/or its contents is covered.

Please Note: You must take all reasonable means to protect, save and/or recover your checked luggage and/or carry-on baggage and/or its contents at all times.

What is not covered?

Luggage Reimbursement does not apply to loss or theft of the following items:
- Automobiles, automobile accessories and/or equipment, motorcycles, motors, bicycles (except when checked with the common carrier), boats, or other vehicles or conveyances
- Contact lenses, eyeglasses, sunglasses, hearing aids, artificial teeth, dental bridges, and prosthetic limbs
- Money, securities, credit or debit cards, checks, and travelers’ checks
- Tickets, documents (travel or otherwise), keys, coins, deeds, bullion, stamps, perishables, consumables, perfume, cosmetics, rugs and carpets, animals, cameras, sporting equipment, and household furniture
- Property shipped as freight or shipped prior to the covered trip departure date
- Items specifically identified or described in and insured under any other insurance policy
- Losses arising from confiscation or expropriation by any government or public authority or detention by customs or other officials
- Losses resulting from abuse, fraud, hostilities of any kind (including, but not limited to, war, invasion, rebellion, or insurrection)
- Business items (items that are used in the purchase, sale, production, promotion, or distribution of goods or services including but not limited to, manuals, computers and their accessories, software, data, facsimile, samples, collateral materials, etc.), cellular telephones, or art objects
- Money, securities, credit or debit cards, checks, and travelers’ checks
- Tickets, documents (travel or otherwise), keys, coins, deeds, bullion, stamps, perishables, consumables, perfume, cosmetics, rugs and carpets, animals, cameras, sporting equipment, and household furniture
- Property shipped as freight or shipped prior to the covered trip departure date
- Items specifically identified or described in and insured under any other insurance policy
- Losses arising from confiscation or expropriation by any government or public authority or detention by customs or other officials
- Losses resulting from abuse, fraud, hostilities of any kind (including, but not limited to, war, invasion, rebellion, or insurrection)
- Business items (items that are used in the purchase, sale, production, promotion, or distribution of goods or services including but not limited to, manuals, computers and their accessories, software, data, facsimile, samples, collateral materials, etc.), cellular telephones, or art objects
- Property shipped as freight or shipped prior to the covered trip departure date

How to file a lost luggage reimbursement claim

Immediately notify the common carrier to begin their claims process if your luggage and/or its contents are lost or stolen.

Within twenty (20) days of the date your luggage is lost or stolen, and you have notified the common carrier and begun their claims process, call the benefit administrator at 1-800-757-1274, or call collect outside the U.S. at 1-804-673-6496. The benefit administrator will ask you for some preliminary claim information and send you a special claim form. If you do not notify the benefit administrator within twenty (20) days of the date the luggage was lost or stolen, your claim may be denied.

Within ninety (90) days of the date your luggage was lost or stolen, return your claim form and the requested documentation below to the address provided by the benefit administrator:
- A copy of your monthly billing statement or the travel itinerary (showing the last four [4] digits of the account number) confirming the common carrier ticket was charged to the covered account and/or rewards program associated with your covered account
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- A copy of ticketing by the common carrier, including but not limited to itinerary, boarding pass, or used ticket stub
- A copy of any check, settlement, denial or explanation of coverage issued by the common carrier together with a copy of the common carrier’s completed claim form, a list of the items lost and their value, and a copy of the luggage claim check (if applicable)
- A copy of your insurance policy’s declarations page (if applicable) to confirm your deductible (declarations page means the document(s) in your insurance policy that lists names, coverages, limits, effective dates and deductibles)
- A copy of any settlement of the loss or theft from your primary insurance
- Any other documentation deemed necessary by the benefit administrator to substantiate the loss or theft

For faster filing, or to learn more about lost luggage reimbursement visit www.eclaimsline.com

If you have personal insurance (i.e., homeowner’s, renter’s, or other insurance applicable to the lost or stolen luggage or contents), you are required to file a claim with your insurance company and submit a copy of any claim settlement along with your completed claim form.

If the claim amount is within your personal insurance deductible, the benefit administrator may, at its discretion, deem a copy of your personal insurance declarations page to be sufficient.

Transference of claims

After the benefit administrator has paid your claim of loss or theft under this reimbursement benefit, all your rights and remedies against any party in respect of this loss or damage will be transferred to the benefit administrator to the extent of the payment made to you. You must give the benefit administrator all assistance as may reasonably be required to secure all rights and remedies.
Lost Luggage Reimbursement (continued)

Definitions
Account means Your credit or debit card Accounts.

Carry-on Baggage means the baggage which You personally carry onto the Common Carrier and for which You retain responsibility.

Checked Luggage means suitcases or other containers specifically designed for carrying personal belongings, for which a claim check has been issued to You by a Common Carrier.

Common Carrier means any land, water, or air conveyance operated under a license for the transportation of passengers for hire and for which a ticket must be purchased prior to commencing travel. Common Carrier does not include taxis, limousine services, or commuter rail or commuter bus lines.

Covered Trip means a trip while the Eligible Person is riding on a Common Carrier as a passenger and not as a pilot, operator or crew member, for which the expense has been charged to Your eligible Account and/or rewards program associated with Your covered Account, and which is not less than five (5) consecutive days but does not exceed sixty (60) consecutive days in duration.

Eligible Person means a cardholder who pays for their Covered Trip by using their eligible Account and/or rewards program associated with their covered Account.

Immediate Family Member means Your Spouse or legally dependent children under age eighteen (18), [twenty-five (25) if enrolled as a full-time student at an accredited university].

Spouse includes Your domestic partner which is a person who is at least 18 years of age and who during the last twelve months: (1) has been in a committed relationship with the cardholder; (2) has been the cardholder’s sole spousal equivalent; (3) has resided in the same household as the cardholder; and (4) has been jointly responsible with the cardholder for each other’s financial obligations and who intends to continue the relationship as stated above indefinitely.

You or Your means an Eligible Person or Your Immediate Family Members who charged a portion of their Covered Trip to Your eligible Account and/or rewards program associated with Your covered Account.

Additional provisions for Lost Luggage Reimbursement

Signed or pinned transactions are covered as long as You use Your eligible card to secure the transaction.

You shall do all things reasonable to avoid or diminish any loss covered by this benefit. This provision will not be unreasonably applied to avoid claims.

If you make any claim knowing it to be false or fraudulent in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled. Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact.

No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought more than two (2) years after the time for giving Proof of Loss. Further, no legal action may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.

This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide will not apply to cardholders whose Accounts have been suspended or cancelled.

Termination dates may vary by financial institutions. Your financial institution may cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. Indemnity Insurance Company of North America (“Provider”) is the underwriter of these benefits and is solely responsible for its administration and claims. The Benefit Administrator provides services on behalf of the Provider.

After the Benefit Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Benefit Administrator to the extent of the payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.

This benefit does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit the provision of insurance, including, but not limited to, the payment of claims.

For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-757-1274, or call collect outside the U.S. at 1-804-673-6496.

Financial Services Common Carrier Accidental Death & Dismemberment and Baggage Delay Insurance

As a Redwood Credit Union Visa Signature Cardholder, you your Spouse, or Domestic Partner and your Dependent Children will be automatically insured against accidental loss of life, limb, sight, speech or hearing occurring on a Common Carrier Covered Trip.

Coverage is also provided to reimburse the cost of essential items needed in the event your Baggage is delayed by the Common Carrier.

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Benefit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidental Death and Dismemberment Insurance</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Baggage Delay</td>
<td>$100 per day, up to 3 days</td>
</tr>
</tbody>
</table>

How does it work?

Accidental Death & Dismemberment Benefits provides coverage up to one million ($1,000,000.00) dollars, for accidental loss of life, limb, sight, speech or hearing while riding as a passenger in, entering or exiting any common carrier on which you have purchased passage using the covered card account, or riding as a passenger in, entering or exiting any conveyance licensed to carry the public for hire or any courtesy transportation provided without a specific charge and while traveling to or from the airport, terminal or station immediately preceding the departure of the scheduled common carrier on which you have purchased passage or immediately following the arrival of the scheduled common carrier on which you were a passenger, or while at the airport, terminal or station at the beginning or end of the common carrier covered trip. If the purchase of the common carrier passenger fare is not made prior to your arrival at the airport, terminal or station, coverage will begin at the time the cost of the common carrier passenger fare is charged to your account. Coverage does not include travel on a cruise ship that extends beyond 48 hours and does not include commutation.
Please submit the following documents:

- Your completed and signed claim form
- A copy of Your monthly billing statement (showing the last 4 digits of the Account number) demonstrating that the charge associated with the common carrier passenger fare was made on Your eligible Account
- A copy of the death certificate, if applicable
- Receipts of any essential items purchased as a result of Baggage Delay
- Any other proof of loss that may be required to substantiate your claim

Definitions

Accidental™ means a sudden, unforeseen, and unexpected event which: 1) happens by chance; 2) arises from a source external to the Insured Person; 3) is independent of illness, disease or other bodily malfunction or medical or surgical treatment thereof; 4) occurs while the Insured Person is insured under this policy which is in force; and 5) is the direct cause of loss.

“Account” means Credit Card accounts, Debit Card accounts, central billed accounts, checking accounts and savings accounts as set forth in the Class Schedule of this Policy.

Baggage Delay Benefits provides coverage up to $100 per day for three days for the emergency purchase of essential items you may need while on a common carrier covered trip at a destination other than your primary residence. Essential items include but is not limited to: clothing, deodorant, toothpaste and toothbrush. Essential items not covered include but are not limited to 1) contact lenses, eyeglasses or hearing aids; 2) artificial teeth, dental bridges or prosthetic devices; 3) tickets, documents, money, securities, checks, travelers checks and valuable papers; 4) business samples; 5) jewelry and watches; or 6) cameras, video recorders and other electronic equipment. The Common Carrier Covered Trip must have been paid for using the covered card Account. We will not pay more than the maximum benefit amount, which when totaled, exceed two times the applicable benefit amount, then the aggregate limit of insurance will be divided proportionally among the Insured Persons, based on each applicable benefit amount.

Loss

<table>
<thead>
<tr>
<th>Loss Description</th>
<th>Percentage of Benefit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of Life; Loss of Speech and Loss of Hearing; Loss of Speech or Hearing and Loss of one Hand, Foot or Sight of One Eye; Loss of Both Hands; Loss of Both Feet; Loss of Sight of Both Eyes; Loss of a combination of any two of a Hand of a Foot or Loss of Sight of One Eye</td>
<td>100%</td>
</tr>
<tr>
<td>Loss of One Hand; Loss of One Foot; Loss of Sight of One Eye; Loss of Speech; Loss of Hearing</td>
<td>50%</td>
</tr>
<tr>
<td>Loss of Thumb and Index Finger of the same hand</td>
<td>25%</td>
</tr>
</tbody>
</table>

The Loss of Life benefit will be paid to the beneficiary designated by you. If no such designation has been made, that benefit will be paid to the first surviving beneficiary in the following order: a) your spouse, b) your children, c) your parents, d) your brothers and sisters, e) your estate. All other indemnities will be paid to you.

If more than one Insured Person insured under the same Account suffers a loss in the same accident, we will not pay more than two times the applicable benefit amount (the aggregate limit of insurance). If an accident results in benefit amounts becoming payable, which when totaled, exceed two times the applicable benefit amount, then the aggregate limit of insurance will be divided proportionally among the Insured Persons, based on each applicable benefit amount.

If, due to an Accident, You have not been found within one (1) year of the disappearance, stranding, sinking, or wrecking of any Conveyance in which You were an occupant at the time of the Accident, then it will be assumed that You have suffered a Loss of Life while insured under the policy. If, due to an Accident, You are unavoidably exposed to the elements and as a result of such exposure suffer a Loss, this will be covered by the policy.

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

If you have questions about this coverage, please call the Benefit Administrator at 1-855-276-2410.

How to File a Claim

1. To file a claim, please call the Benefit Administrator at 1-855-276-2410. Written claim notice must be given to us within 20 days after the occurrence of any loss covered by this policy or as soon as reasonably possible. Failure to give notice within 20 days will not invalidate or reduce any otherwise valid claim if notice is given as soon as reasonably possible.

2. When we receive notice of a claim, we will send you forms for giving proof of loss to us within 15 days. If you do not receive the forms, you should send us a written description of the loss.

3. Complete proof of loss must be given to us within 90 days after the date of loss, or as soon as reasonably possible. Failure to give complete proof of loss within these time frames will not invalidate any otherwise valid claim if notice is given as soon as reasonably possible and in no event later than 1 year after the deadline to submit complete proof of loss.

4. We will pay you or your beneficiary the applicable benefit amount within 60 days after we receive complete proof of loss and you, the policyholder and/or the beneficiary have complied with all the terms of this policy.

Please submit the following documents:

- Your completed and signed claim form
- A copy of Your monthly billing statement (showing the last 4 digits of the Account number) demonstrating that the charge associated with the common carrier passenger fare was made on Your eligible Account
- A copy of the death certificate, if applicable
- Receipts of any essential items purchased as a result of Baggage Delay
- Any other proof of loss that may be required to substantiate your claim
“Accountholder” means any individual who is named on an open and active Account with the Policyholder.


“Baggage” means suitcases and the containers specifically designated for carrying personal property, and the personal property contained therein.

“Baggage Delay” means a delay or misdirection of the Insured Person’s Baggage by a Common Carrier for more than four (4) hours from the time the Insured Person arrives at the destination on the Insured Person’s ticket.

“Common Carrier” means any motorized land, water or air Conveyance, operated by an organization other than the Policyholder, organized and licensed for the transportation of passengers for hire and operated by an employee or an individual under contract. Common Carrier does not include helicopters, travel on cruise ships that extends beyond forty-eight (48) hours, sight-seeing tours or any Conveyance used for recreational activities.

“Common Carrier Covered Trip” means travel on a Common Carrier when the full fare for such transportation less any redeemable frequent flyer miles, coupons or certificates has been charged to the Insured Person’s Account issued by the Policyholder. If frequent flyer miles, coupons or certificates are redeemed a charge of at least $1.00 or the full amount due for the trip, whichever is greater, must be charged to the Account for travel to be considered a Common Carrier Covered Trip.

“Commutation” means travel between the Insured Person’s residence and regular place of employment.

“Conveyance” means any motorized craft, vehicle or mode of transportation licensed or registered by a governmental authority with competent jurisdiction.

“Convenience Transportation” means transportation provided without a specific charge by a rental car agency, airport or hotel which transports the Insured Person from the airport or station to the rental car agency or hotel, or from the rental car agency or hotel to the airport or station.

“Dependent Child” means the Primary Insured Person’s unmarried child from the moment of birth, including a natural child, grandchild, stepchild or adopted child from the date of placement with the Primary Insured Person. The Dependent Child must be primarily dependent upon such Primary Insured Person for maintenance and support, and must be: 1) under the age of nineteen (19); 2) under the age of twenty-five (25) if enrolled as a full-time student at an Institution of Higher Learning; or 3) classified as an Incapacitated Dependent Child.

“Domestic Partner” means a person designated in writing by the Primary Insured Person who is registered as a Domestic Partner or legal equivalent under laws of the governing jurisdiction or who: 1) is at least 18 years of age and competent to enter into a contract; 2) is not related to the Primary Insured Person by blood; 3) has exclusively lived with the Primary Insured Person for at least twelve (12) consecutive months prior to the date of enrollment; 4) is not legally married or separated; and 5) as of the date of enrollment, has with the Primary Insured Person at least two (2) of the following financial arrangements: a) a joint mortgage or lease; b) a joint bank account; c) joint title to or ownership of a motor vehicle or status as a joint lessee on a motor vehicle lease; or d) a joint credit card account with a financial institution. Neither the Primary Insured Person nor the Domestic Partner can be married to, nor in a civil union with, anyone else.

“Domestic Partner” (applicable to CA Residents) are two adults who have chosen to share one another’s lives in an intimate and committed relationship of mutual caring in a Domestic Partnership. Domestic Partnership will be established in California when both persons file a Declaration of Domestic Partnership with the Secretary of State and, at the time of filing, all of the following requirements are met: 1) Neither person is married or a member of another Domestic Partnership. 2) The two persons are not related by blood in a way that would prevent them from being married to each other in California. 3) Both persons are at least 18 years of age, except a person under 18 years of age who, together with the other proposed domestic partner, otherwise meets the requirements for a domestic partnership other than the requirement of being at least 18 years of age, may establish a domestic partnership upon obtaining a court order granting permission to the underage person or persons to establish a domestic partnership. 4) Both persons are capable of consenting to the Domestic Partnership. The term “Spouse”, wherever used, will include a Domestic Partner.

“Institution of Higher Learning” means any accredited public or private college, university, professional trade or vocational school beyond the twelfth (12th) grade.


“Physician” means a licensed practitioner of the healing arts, acting within the scope of his or her license to the extent provided by the laws of the jurisdiction in which medical treatment is provided. Physician does not include: 1) the Insured Person; 2) an Immediate Family Member; 3) the Insured Person’s employer or business partner; or 4) the Policyholder.

“Proof of Loss” means written evidence acceptable to Us that an Accident, Accidental Bodily Injury or Loss has occurred.

“Spouse” means the Insured Person’s husband or wife who is recognized as such by the laws of the jurisdiction in which the Primary Insured Person resides.

“War” means: 1) hostilities following a formal declaration of war by a governmental authority; 2) in the absence of a formal declaration of War by a governmental authority armed, open and continuous hostilities between two countries; or 3) armed, open and continuous hostilities between two factions, each in control of territory, or claiming jurisdiction over the geographic area of hostility.

“We, Our, Us” means the Insurance Company underwriting this insurance or its authorized agent.
The terms We, Us and Our below refer to Federal Insurance Company.

This insurance is underwritten by Federal Insurance Company.

If you make any claim knowing it to be false or fraudulent in any respect, no coverage shall exist for such claim, and Your benefit may be cancelled. Each cardholder agrees that representations regarding claims will be accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact.

No legal action for a claim may be brought against the Provider until sixty (60) days after the Provider receives Proof of Loss. No legal action against the Provider may be brought more than two (2) years after the time for giving Proof of Loss. Further, no legal action may be brought against the Provider unless all the terms of the Guide to Benefits have been complied with fully.

This benefit is provided to eligible cardholders at no additional cost. The terms and conditions contained in this Guide to Benefits may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefits mailings, statement inserts, statement messages or electronic notification. The benefits described in this Guide will not apply to cardholders whose Accounts have been suspended or cancelled.

Termination dates may vary by financial institutions. Your financial institution can cancel or non-renew the benefits for cardholders, and if they do, they will notify You at least thirty (30) days in advance. The Benefit Administrator provides services on behalf of the Provider.

We have the right to request an autopsy in the case of death, unless the law forbids it. We will pay the cost of the examination or autopsy.

After the Benefit Administrator has paid Your claim, all Your rights and remedies against any party in respect of this claim will be transferred to the Benefit Administrator to the extent of the payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.