



Advisors

Your Visa Card Guide to Benefits

Wells Fargo Advisors *By Invitation*[®] Visa Signature[®] Credit Card

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Your Guide to Benefits describes the benefits in effect as of 12/1/2018. Benefits information in this guide replaces any prior benefits information you may have received. Please read and retain for Your records. Your eligibility is determined by your financial institution.

This Guide to Benefits details Your insurance's principal provisions and is not an insurance contract. The master policy defines this plan's complete provisions. Please keep this reference guide handy and in a safe place with Your other insurance documents.

For questions about Your account, balance, or rewards points, please call the customer service number on Your Visa statement.

Section 1 — Shopping Benefits

Cellular Telephone Protection

When does protection begin?

Cellular Telephone Protection coverage begins the first day of the calendar month following your first cell phone payment on your eligible Wells Fargo Consumer Credit Card, and remains in effect when you continue to charge your total monthly cell phone bill to your Wells Fargo Consumer Credit Card.

What is covered?

Cellular Telephone Protection can reimburse the eligible Wells Fargo Consumer Credit Card cardholder for damage to or theft of or involuntary and accidental parting of Your cell phone. Reimbursement is limited to the repair or replacement of your original cell phone, less a \$25 deductible with a maximum benefit limit of \$600 per claim and \$1,200 per 12 month period.

What is not covered?

The coverage does not apply

- If the cell phone bill is paid from a Wells Fargo Debit Card, Wells Fargo Business Credit Card, Wells Fargo Commercial Card or from the card that is linked to a Line of Credit;
- Cell phones that are rented, borrowed, or received as part of a prepaid plan or “pay as you go” type plans; and
- Electronic failure or issues related to the software of the device.
- Lost cell phones (i.e. disappear without explanation).

This protection is only available when cell phone bills are paid from your Wells Fargo Consumer Credit Card. This is supplemental coverage 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) and may be applied after all other insurance. This protection may not be equivalent to or better than other applicable coverage.

Where to get more details?

For complete coverage benefits and exclusions regarding this protection call **1-866-804-4770** or outside the U.S. call collect at **1-303-967-1096**, 24 hours a day, seven days a week or go to www.wellsfargo.com/cellphone.

NOTE: Call your cellular provider (or log on to their website) and request to set up automatic payments. Setting up automatic payments is not required to qualify for Cellular Telephone Protection; however, you need to pay your monthly cell phone bill with your eligible Wells Fargo Consumer Credit Card to get up to \$600 protection.

Extended Warranty Protection

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 programs 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 charge some portion of the item’s purchase price to Your covered Account and/or rewards programs associated with their covered Account.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Eligible Person** means a cardholder who pays for their purchase by using their eligible Account and/or rewards programs associated with their covered Account.

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

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 extended by 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 twelve (12) months of coverage for a combined total of fifteen (15) months of coverage, and a warranty for six (6) months would be provided with an additional twelve (12) months of coverage for a combined total of eighteen (18) 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
- Rented or leased 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.)

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 4 digits of the Account number) demonstrating that the purchase was made on Your eligible Account and/or rewards programs associated with their 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.

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 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.

FORM #EWP 10K-50K-3YR – 201 7 (04/17)

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Price Protection

With Price Protection, if You buy an eligible item with Your covered Account and/or rewards programs associated with Your covered Account in the United States and see the identical eligible item available for less in another retail store's printed Advertisement or non-auction Internet Advertisement within sixty (60) days of the Date of Purchase, You can be reimbursed the difference up to (\$500.00) per item and up to (\$2,500.00) a year.

You are eligible for this benefit if You are a valid cardholder of an eligible U.S. issued card and You charge either a portion or the entire purchase price of the eligible item to Your Account and/or rewards program earned on Your covered Account toward the purchase. You will only be reimbursed up to the amount charged to Your Account or the program limit.

Price Protection is secondary to and in excess of store policies offering a lowest-price guarantee or any other form of refund for price differences. Only items Advertised by authorized dealers in the United States apply. Price differences involving manufacturing and/or merchant rebates, shipping and handling fees, and sales tax, if any, are not covered by the Price Protection benefit.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Advertised or Advertisements** means an Advertisement printed in a newspaper, journal, magazine, or flyer or items Advertised on a non-Auction internet site, distributed in the United States to the general public and placed by a manufacturer or authorized dealer of the consumer product in the United States. The advertisement must provide information stating the same manufacturer and model number of the item purchased. Advertisements that are cut down or altered in any way will not be accepted; therefore, any Advertisements, catalogs, etc. must be submitted in whole with date verification. The only exception is Advertisements in magazines and newspapers. In these cases, it's not necessary to submit the whole publication; only

the whole page or pages in which the Advertisement appears, with the date and name of the publication, is required. Advertisements posted on the Internet, by a non-Auction Internet merchant with a valid tax identification number, are also eligible. The advertisement must provide information stating the same manufacturer and model number of the item purchased. The printed version of the non-Auction internet advertisement must include the merchant's Internet address and customer service telephone number, as well as the item, including manufacturer, model number, sale price, and date of publication.

- **Date of Purchase** means the date You paid for and received the item, or the date of delivery and personal acceptance of the item, whichever is later.
- **Eligible Person** means a cardholder who pays for their purchase by using their eligible Account and/or rewards programs associated with their covered Account.
- **You** or **Your** means an Eligible Person who used their eligible Account to purchase the item and/or rewards programs associated with their covered Account.

How does it work?

1. Use Your eligible Account and/or rewards programs associated with Your covered Account to purchase the eligible item. Be sure to save all original receipts; both Your Account paperwork and the itemized store receipt.
2. If You see the identical product by the same manufacturer Advertised for a lower retail price within sixty (60) days of Your purchase, keep the original printed Advertisement and make sure the Advertisement includes:
 - A description of the item that is identical to the one You purchased
 - The sale price
 - The store or dealer's name
 - A sale date(s) effective within sixty (60) days of the Date of Purchase

What isn't covered?

- Internet Auction Advertisements including but not limited to sites such as eBay, Ubid, Yahoo and public or private live auction sites.
- Advertisements of cash-only sales, close-out sales, flea markets, fire sales, going-out-of-business sales, limited-quantity promotions or liquidation sales.
- Advertisements of sales of seasonal or discontinued items including, but not limited to, holiday decorations.
- Animals and living plants.
- Boats, automobiles, and any other motorized vehicles and their motors, equipment, or accessories.
- Cell phone service agreements and cell phone contracts.
- Items purchased for resale, professional, or commercial use.
- Jewelry, antiques, and collectible items, rare or one-of-a-kind items, special order items, custom items, or tailored items.
- Manufacturer and/or merchant rebates
- Perishables, services, consumables, and limited-life items including, but not limited to, rechargeable batteries.
- 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.
- Traveler's checks, cash, tickets, credit or debit cards, and any other negotiable instruments.
- Items purchased outside of the United States.
- Items that are previously owned, sold "as is," and/or refurbished.

How to File a Price Protection Claim

1. Notify the Benefit Administrator within ten (10) days of the printed Advertisement showing Your product at a lower price at **1-800-553-7520**, or outside the U.S. call collect at **1-303-967-1096**. The Benefit Administrator will answer any questions You may have and send You a claim form.
2. Return the claim form and the requested documentation below within twenty (20) days of contacting the Benefit Administrator. Send all information to the address provided by the Benefit Administrator.

Please submit the following documents

- The completed signed claim form
- The original itemized sales receipt for Your purchase or original packing slip in the case of mail order purchases
- 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 covered Account and/or rewards programs 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.
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim
- The original printed Advertisement or print out from a non-auction Internet site showing the item with its sale date and/or date of the Advertisement, lower Advertised price, and advertising store name to:
Card Benefit Services
P.O. Box 110889
Nashville, TN 37222

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

Additional Provisions for Price 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 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 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.

FORM #PRICEPROT – 2018 (03/18)

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Purchase Security

Purchase Security protects new retail purchases made with Your eligible Account and/or rewards programs associated with Your covered Account within the first ninety (90) days from the date of purchase. To be eligible for this coverage, You need to purchase either a portion or the entire cost of the item using Your Account

At the Benefit Administrator's discretion, this benefit replaces, repairs, or reimburses You, up to the total purchase price of Your item for a maximum of ten thousand dollars (\$10,000.00) per claim and fifty thousand dollars (\$50,000.00) per cardholder, in the event of theft or damage.

You are eligible for this benefit if You are a cardholder of an eligible card issued in the United States. Gifts purchased for friends and family members may also be covered if they are purchased with Your covered Account and/or rewards programs associated with Your covered Account.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Eligible Person** means a cardholder who pays for their purchase by using their eligible Account and/or rewards programs associated with their covered Account.
- **You** or **Your** means an Eligible Person who used their eligible Account to purchase the item and/or rewards programs associated with their covered Account.

Purchase Security Covers

Eligible items of personal property purchased with Your Account and/or rewards programs associated with Your covered Account are covered for damage or theft. Purchases made outside the United States are also covered as long as You purchased the item with Your covered Account and/or rewards program associated with Your covered Account.

Purchase Security Does Not Cover

- Animals and living plants
- Antiques or collectible items
- Boats, aircraft, automobiles, and any other motorized vehicles and their motors, equipment, or accessories, including trailers and other items towable or attachable to any motorized vehicle
- Broken items, unless the result of a covered occurrence
- Computer software
- Items purchased for resale, either professional or commercial use
- Items that are lost, or that "mysteriously disappear," meaning they vanished in an unexplained manner, with no evidence of wrongdoing by one person or several
- Items under the control and care of a common carrier (including the U.S. Postal Service, airplanes, or a delivery service)
- Items in Your baggage (unless hand carried, or under Your supervision or that of a companion You know); includes jewelry and watches, among other things

- Theft or damage stemming from abuse, fraud, hostilities (war, invasion, rebellion, insurrection, terrorist activities, and more); confiscation by authorities (if contraband or illegal); normal wear and tear; flood, earthquake, radioactive contamination; damage from inherent product defects
- Theft or damage from misdelivery, or voluntarily parting with property
- Medical equipment
- Perishable or consumable items, including cosmetics, perfumes, rechargeable batteries, among others
- Real estate and items intended for real estate, including hard-wired and hard-plumbed items, garage doors and openers, ceiling fans, among other items
- Rented and leased items
- Traveler's checks, cash, tickets, credit or debit cards, among other negotiable purchased instruments
- Items used or pre-owned (Refurbished items will not be considered used or pre-owned as long accompanied by a warranty)

Filing a Purchase Security Claim

Call the Benefit Administrator at **1-800-553-4820**, or call collect outside the U.S. at **1-303-967-1096**, within sixty (60) days of the damage or theft (if You wait longer, coverage may be denied). The Benefit Administrator will ask for some preliminary claim information, answer Your questions and send You a claim form. When You submit Your claim, be sure to include all information regarding Your claim including the time, place, cause and the amount to either replace or repair the item.

If You have insurance (homeowner's, renter's, car, employer or any other), You are required to file a claim with Your insurance company and to submit a copy of any claim settlement from Your insurance company along with Your claim form. Purchase Security provides coverage on an "excess" coverage basis, meaning it does not duplicate coverage, but pays for a loss only after valid and collectible insurance or indemnity (including, but not limited to, homeowner's, renter's, automobile, or employer's insurance policies) has been exhausted. At that point, Purchase Security will cover the loss up to the amount charged to Your eligible Account, subject to the terms, exclusions, and limits of liability of the benefit.

This benefit also pays for the outstanding deductible portion of Your insurance or indemnity for eligible claims. The maximum total limit of liability is up to ten thousand dollars (\$10,000.00) per claim occurrence and fifty thousand dollars (\$50,000.00) per cardholder. You will receive no more than the purchase price as recorded on the eligible card receipt.

When a protected item is part of a pair or set, You will receive no more than the value (as described above) of the particular part or parts, stolen or damaged, regardless of any special value that item may have as part of such a pair or set, and no more than the proportionate part of an aggregate purchase price of such pair or set.

For faster filing, or to learn more about Purchase Security, visit www.cardbenefitservices.com

Gift recipients may file their own claims, if they have the necessary substantiating documents.

What You Must Submit to File a Claim

- Your signed and completed claim form
- 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 programs 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 store receipt demonstrating that the purchase was made on Your eligible Account and/or rewards programs associated with Your covered Account.
- Copy of the documentation of any other settlement of the loss (if applicable)
- If the item is repairable, the estimate of repair OR a copy of the paid receipt/invoice for the repairs, indicating the type of damage to the claimed item (if applicable)
- A copy of a police report (in the case of theft), fire report, or other incident report **made within forty-eight [48] hours or as soon as reasonably possible of the occurrence.** All losses must be substantiated. If the loss was not reported, please contact the Benefit Administrator to determine if there may be other documentation that can be provided to determine your eligibility for Purchase Protection.
- Any other documents necessary to substantiate Your claim.

In some cases of damage, You will be asked to send, *at Your expense*, the damaged item along with Your claim in order to substantiate the claim, so make sure to keep the damaged item in Your possession.

PLEASE NOTE: Your maximum recovery under the Purchase Security Benefit is the purchase price of the item, not to exceed the coverage limit.

Please return Your signed and completed form with all documentation within ninety (90) days of the date of theft or damage.

How You Will Be Reimbursed

Once You've met the conditions of this benefit, the Benefit Administrator will resolve Your claim in one of two ways:

- A damaged item may be repaired, rebuilt, or replaced, while a stolen item will be replaced. Typically, You will receive notice about this decision within fifteen (15) days upon receipt of Your claim documentation.
- You may receive payment to replace Your item, an amount not more than the original purchase price, less shipping and handling charges, up to ten thousand dollars (\$10,000.00) per claim and fifty thousand dollars (\$50,000.00) per cardholder. You will only be reimbursed up to the dollar amount to replace or repair the item or the program limit, whichever is less. Under normal circumstances, reimbursement will take place within five (5) business days.

Additional Provisions for Purchase Security

- 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 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 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.

FORM #VPSECALLPER 10K 0– 2017 (04/17)

PPS-O

Section 2 — Travel Benefits

Visa Concierge Services

How do I use Visa Signature Concierge Service?

Receive access to our complimentary 24-hour concierge service to help plan the perfect vacation, book travel, make restaurant reservations, and more. Visit www.visasignatureconcierge.com or call **1-800-953-7392**. Wells Fargo Advisors By Invitation Visa Signature cardholders are responsible for the payment of any and all charges associated with any goods, services, reservations or bookings purchased or arranged by the Visa Signature Concierge on cardholders' behalf. Any such purchases or arrangements are solely between the cardholder and the respective merchant, and Visa is not a party to the transaction. All goods and services subject to availability. See full terms of service at visasignatureconcierge.com.

Emergency Cash Disbursement and Card Replacement

Lost, stolen, or damaged card? Need emergency card or cash? Visa credit cardholders can get an emergency cash advance disbursed or a card replaced within one to three business days, in some cases, within 24 hours, after issuer approval. This benefit is available on all Visa credit cards.

Who do I contact for help?

If You need to replace Your card or want help with receiving emergency cash, contact the Visa Global Customer Care Services at the following numbers at **1-800-397-9010** or call the Visa direct line **1-303-967-1096** 24 hours a day, seven days a week.

How do I get emergency cash?

Once You call the Visa Global Customer Care Services associate at the above phone numbers, We'll work with you and your financial institution for approval. Visa will arrange a convenient location for you to collect the emergency cash.

How do I replace my card?

If your card is lost, stolen or damaged, call a Visa Global Customer Care Services associate at **1-800-397-9010** or call one of our global toll-free-numbers located within the Visa website: <https://usa.visa.com/support/consumer/lost-stolen-card.html>. We'll work with you and your financial

institution for approving Your card. Visa will arrange delivering Your card directly to you or at a different collection location.

How do I report a lost or stolen card?

If You lose Your Visa Signature card or someone steals it, we'll help you notify the appropriate parties and replace Your card. This worldwide service saves You valuable time. You can use this benefit 24 hours a day, seven days a week. To do so, please call either:

Visa Toll-Free Number **1-800-397-9010**

Visa Direct-Dial Number **1-303-967-1096**

Travel and Emergency Assistance Services

Travel and Emergency Assistance Services are made available to help You in case of an emergency while You are traveling away from home. The Benefit Administrator can connect You with the appropriate local emergency and assistance resources available, 24 hours a day, 365 days a year.

Please note that due to occasional issues such as distance, location, or time, neither the Benefit Administrator nor its service providers can be responsible for the availability, use, cost, or results of any medical, legal, transportation, or other services.

Definitions

- **Common Carrier** means any mode of transportation by land, water or air operating for hire under a license to carry passengers for which a ticket must be purchased prior to travel. Does not include taxi, limousine service, commuter rail or commuter bus lines.
- **You or Your** means an eligible person whose name is embossed on an eligible U.S. issued card, and You reside in the United States.

What are Travel and Emergency Assistance Services, and how do I use them?

Travel and Emergency Assistance Services are made available to You, if You are a cardholder of an eligible card issued in the United States. Your spouse and children (dependents under 22 years old) are also eligible to use these services.

Travel and Emergency Assistance Services provide assistance and referral only. You are responsible for the cost of any actual medical, legal, transportation, cash advance, or other services or goods provided.

To use the services, simply call the toll-free, 24-hour Benefit Administrator line at **1-800-992-6029**. If You are outside the United States, call collect at **1-804-673-1675**.

What are the specific services and how can they help me?

- **Emergency Message Service** — can record and relay emergency messages for travelers or their immediate family members. The Benefit Administrator will use reasonable efforts to relay emergency messages in accordance with benefit guidelines and limitations, but cannot take responsibility for the failure to transmit any message successfully. *All costs are Your responsibility.*
- **Medical Referral Assistance** — provides medical referral, monitoring, and follow-up. The Benefit Administrator can give You names of local English-speaking doctors, dentists, and hospitals; assign a doctor to consult by phone with local medical personnel, if necessary, to monitor Your condition; keep in contact with Your family, and provide continuing liaison; and help You arrange medical payments from Your personal account. *All costs are Your responsibility.*
- **Legal Referral Assistance** — can arrange contact with English-speaking attorneys and U.S. embassies and consulates if You're detained by local authorities, have a car accident, or need legal assistance. In addition, the Benefit Administrator can coordinate bail

payment from Your personal account. The Benefit Administrator can also follow up to make sure bail has been properly handled. *All costs are Your responsibility.*

- **Emergency Transportation Assistance** — can help You make all the necessary arrangements for emergency transportation home or to the nearest medical facility. This includes arranging to bring Your Young children home and helping You stay in contact with family members or employers during the emergency. In the case of a death, the Benefit Administrator can make arrangements to repatriate the remains. *All costs are Your responsibility.*
- **Emergency Ticket Replacement** — helps You through Your carrier's lost ticket reimbursement process and assists in the delivery of a replacement ticket to You, should You lose Your ticket. *All costs are Your responsibility.*
- **Lost Luggage Locator Service** — can help You through the Common Carrier's claim procedures or can arrange shipment of replacement items if an airline or Common Carrier loses Your checked luggage. *You are responsible for the cost of any replacement items shipped to You.*
- **Emergency Translation Services** — provides telephone assistance in all major languages and helps find local interpreters, if available, when You need more extensive assistance. *All costs are Your responsibility.*
- **Prescription Assistance and Valuable Document Delivery Arrangements** — can help You fill or replace prescriptions, subject to local laws, and can arrange pickup and delivery of Your prescriptions filled for You at local pharmacies. It can also help transport critical documents that You may have left at Your home or elsewhere. *All costs are Your responsibility.*
- **Pre-Trip Assistance** — can give You information on Your destination before You leave such as ATM locations, currency exchange rates, weather reports, health precautions, necessary immunizations, and required passport visas.

Additional Provisions for Travel and Emergency Assistance Services

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.

FORM #TEAS – 2017 (STAND 04/17)

TEAS-O

Emergency Medical/Dental Coverage

Emergency Medical/Dental provides reimbursement for Emergency Treatment if You become sick or accidentally injured while traveling on a Covered Trip purchased with Your eligible Account and/or rewards programs associated with Your covered Account. To be eligible for this coverage, You need to purchase either a portion or the entire cost of the Covered Trip using Your covered Account and/or rewards programs associated with Your covered Account.

You, Your spouse and Your dependent children are eligible for coverage if You purchase a Covered Trip with Your eligible card issued in the United States and/or rewards programs associated with Your covered Account.

Emergency Medical/Dental benefit limit: up to two thousand five hundred dollars (\$2,500.00); subject to a fifty-dollar (\$50.00) deductible.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Common Carrier** means any mode of transportation by land, water or air operating for hire under a license to carry passengers for which a ticket must be purchased prior to travel. Does not include taxi, limousine service, commuter rail or commuter bus lines.
- **Covered Trip** means arrangements that are made by a commercial licensed travel establishment consisting of travel agencies and/or Common Carrier organizations, for which the expense has been charged to Your eligible Account and/or rewards programs 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, his/her spouse or legally dependent children under age eighteen (18) [twenty-five (25) if enrolled as a full-time student at an accredited university whose Covered Trip was paid for by using their eligible card and/or rewards programs associated with their covered Account.
- **Emergency Treatment** means the services or supplies provided by a dentist, hospital, physician or other provider which are medically necessary to treat any injury, sickness or other covered condition where the onset is sudden and unexpected, considered life-threatening, and if left untreated, could deteriorate resulting in serious and irreparable harm.
- **Reasonable and Customary Charges** means charges commonly used by providers of medical care in the locality in which care is furnished.
- **Residence** means Your home address as listed in Your card issuer's file or address reflected on Your billing statement. The home address from the card issuer's records will take precedence over billing statement address in determining the eligibility of coverage.
- **You** or **Your** means an Eligible Person or Your spouse or dependent children who charged their Covered Trip to Your eligible Account and/or rewards programs associated with Your covered Account.

What is Emergency Medical/Dental and when does it apply?

The *Emergency Medical/Dental* benefit applies if You suffer an injury or illness and require Emergency Treatment during Your Covered Trip. The Covered Trip must take place via a Common Carrier, be no less than five (5) days and no more than sixty (60) days and at least one hundred* (100) miles from Your Residence.

*Note: Under New York laws, when a cardholder's mailing address is in the State of New York, the requirement that You must be one hundred (100) or more miles from Your Residence does not apply.

Your covered medical expenses are necessary services and supplies that are recommended by Your attending physician and take place during the course of Your Covered Trip. They include:

- The services of a legally qualified physician, surgeon, graduate nurse, dentist, or osteopath
- Charges for hospital confinement and use of operating rooms
- Charges for anesthetics (including administration), x-ray examinations or treatments, and laboratory tests
- Ambulance services
- Drugs, medicines, and therapeutic services and supplies

This benefit is supplemental to and excess of any valid and collectible insurance or other reimbursement.

What if I need to recuperate after my hospital stay?

If You are hospitalized as a result of a covered accident or sickness during Your Covered Trip and Your attending physician determines that You should recover in a hotel immediately after Your release from the hospital and before returning home, You may be eligible for an additional

benefit of seventy-five dollars (\$75.00) per day for up to a maximum of five (5) days towards the cost of a hotel room.

What isn't covered?

Benefits will not be paid in excess of the Reasonable and Customary charges. These benefits do not cover any expense resulting from the following:

- Travel for the purpose of obtaining medical treatment
- Non-emergency services, supplies or charges
- Services, supplies, or charges made by You, Your spouse, dependent children or family member.
- Care not prescribed by or performed by or upon the direction of a physician or dentist
- Care not medically necessary as determined by the Benefit Administrator
- Care rendered by a provider other than a hospital, physician, or dentist
- Care which is experimental/investigative in nature
- Care for any illness or bodily injury that occurs in the course of employment if You are eligible for benefits or compensation in whole or in part, under the provisions of any legislation of any governmental unit (for example – workers compensation coverage). This applies whether or not You claim or recover any benefits or compensation and whether or not You recover losses from a third party.
- Payments to the extent benefits are provided by any governmental agency or unit (except Medicare)
- Care received for which You would have no legal obligation to pay in the absence of this or any similar benefit
- Care received in Afghanistan, Burma, El Salvador, Iran, Iraq, Kampuchea, Laos, Lebanon, Nicaragua, North Korea, Vietnam, Yemen, and any other country which may be determined by the U.S. Government from time to time to be unsafe for travel.
- Care for any illness or injury suffered due to:
 - Self-inflicted harm
 - Attempted suicide
 - Mental health issues
 - Alcoholism or substance abuse
 - War; military duty; civil disorder
 - Air travel except as a passenger on a licensed aircraft operated by an airline or air charter company
 - Routine physical examinations
 - Hearing aids; eyeglasses or contact lenses
 - Routine dental care, including dentures and false teeth
 - Hernia, unless it results from a covered accident
 - Elective abortion
 - Participation in or attempt at a felonious act
 - Skydiving, scuba, skin, or deep sea diving
 - Hang gliding, parachuting, rock climbing and contests of speed

How to File an Emergency Medical/Dental Claim

1. Within ninety (90) days of receiving medical care while on an eligible Covered Trip notify the Benefits Administrator at **1-800-434-1280**, or call collect outside the U.S. at **1-804-673-6499**. The Benefits Administrator will answer Your questions and send You a claim form.
2. Return the claim form and the requested documentation below within one-hundred and eighty (180) days of the date of the event to the address below:

Card Benefit Services
P.O. Box 72034
Richmond, VA 23255

Please submit the following documents

- The completed signed claim form
- A copy of Your monthly billing statement or the travel itinerary

(showing the last 4 digits of the Account number) confirming the Common Carrier ticket was charged to Your covered Account and/or rewards programs associated with their 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 statement from Your insurance carrier (and/or Your employer, or Your employer's insurance carrier) or other reimbursement showing any amounts they may have paid towards the costs claimed. Or, if You have no other applicable insurance or reimbursement, please provide a statement to that effect.
- A copy of any other valid and collectible insurance or reimbursement available to You if applicable
- Receipts for the eligible medical/dental expenses
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim

Additional Provisions for Emergency Medical/Dental Coverage

- 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.

Emergency Evacuation and Transportation/ Repatriation of Remains Coverage

You can receive coverage for expenses not reimbursed elsewhere, if You or an immediate family member requires Emergency Evacuation and Transportation or Repatriation of Remains while on a Covered Trip purchased with Your eligible card issued in the United States and/or rewards programs associated with Your covered Account. To be eligible for this coverage, You need to purchase either a portion or the entire cost of the Covered Trip with Your covered Account/or rewards programs associated with Your covered Account.

Emergency Evacuation and Transportation benefit limit:

up to ten thousand
dollars (\$10,000.00)

Repatriation of Remains benefit limit:

up to one thousand dollars
(\$1,000.00)

Please Note: These benefits are supplemental to and excess of any valid and collectible insurance or other coverage. Note that coverage is secondary to any existing health and/or dental coverage the Eligible Person may have, including workers compensation and disability benefits whether or not provided by law. *In order to be eligible for this benefit, medical evacuation and transportation arrangements must be pre-approved by the Benefit Administrator in consultation with a legally licensed Physician who certifies that the severity of the injury or sickness warrants Emergency Evacuation.* The Benefit Administrator must also make the actual medical transportation arrangements.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Common Carrier** means any mode of transportation by land, water or air operating for hire under a license to carry passengers for which a ticket must be purchased prior to travel. Does not include taxi, limousine service, commuter rail or commuter bus lines.
- **Covered Trip** means arrangements that are made by a commercial licensed travel establishment consisting of travel agencies and/or Common Carrier organizations, for which the expense has been charged to Your eligible card and/or rewards programs 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, his/her spouse or legally dependent children under age eighteen (18) [twenty-five (25) if enrolled as a full-time student at an accredited university whose Covered Trip was paid for by using their eligible card and/or rewards programs associated with their covered Account.
- **Hospital** means a facility that holds a valid license if required by the law; operates primarily for the care and treatment of sick or injured persons as inpatients; has a staff of one or more Physicians available at all times; provides 24-hour nursing services and has at least one registered professional nurse on duty or on call; has organized diagnostic and surgical facilities, either on the premises or in facilities available to the Hospital on a pre-arranged basis; and is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or similar institution.
- **Physician** means a licensed practitioner of the healing arts acting within the scope of his/her license. The treating Physician may not be yourself or a family member.
- **Residence** means Your home address as listed in Your card issuer's file or address reflected on Your billing statement. The home address from the card issuer's records will take precedence over billing statement address in determining the eligibility of coverage.
- **You or Your** means an Eligible Person or Your immediate family

members who charged their Covered Trip to Your covered Account and/or rewards programs associated with Your covered Account.

What is an Emergency Evacuation and when does it apply?

Emergency Evacuation means:

- a. Your medical condition warrants immediate transportation from the place where You are injured or sick to the nearest Hospital where appropriate medical treatment can be obtained; or
- b. After treatment at a local Hospital, Your medical condition warrants transportation back to Your Residence for further medical treatment or recovery; or
- c. Both a) and b) above

The Emergency Evacuation benefit applies if You suffer an injury or illness resulting in a necessary Emergency Evacuation when You are on a Covered Trip. The Covered Trip must be no less than five (5) days and no more than sixty (60) days and at least one hundred* (100) miles from Your Residence.

*Note: Under New York laws, when a cardholder's mailing address is in the State of New York, the requirement that You must be one hundred (100) or more miles from Your Residence does not apply.

What is covered by the Emergency Evacuation benefit?

Covered expenses include those for transportation, medical services, and medical supplies needed to facilitate Your Emergency Evacuation. All transportation arrangements must be:

- a. Recommended by the attending Physician;
- b. Required by the standard regulations of the conveyance transporting You; and
- c. Arranged and approved in advance by the Benefits Administrator.

What is Emergency Transportation and when does it apply?

Emergency Transportation means any land, water, or air conveyance required to transport You during an Emergency Evacuation. Such transportation includes, but is not limited to, air ambulances, land ambulances, and private motor vehicles.

The Emergency Transportation benefit applies if You are hospitalized for more than eight (8) days, the Benefit Administrator arranges for a relative or friend to visit Your bedside and pays the cost of any economy-class round-trip ticket for that person. You are also eligible to receive coverage for the cost of an economy airfare ticket, if the original ticket(s) cannot be used, or to return an accompanying minor to his/her Residence when applicable. The return tickets must be turned over to the Benefits Administrator whenever possible or the Benefit Administrator must be reimbursed the amount equivalent to the value of the unused ticket.

What is Repatriation of Remains and when does it apply?

Repatriation of Remains means the return the Eligible Person's remains to the Eligible Person's country of Residence, The Repatriation of Remains benefit applies in the event of Your death during the course of a Covered Trip. The Benefits Administrator will pay the reasonable covered expenses up to one thousand dollars (\$1,000.00) to return Your body to Your Residence. The covered expenses include, but are not limited to, embalming, cremation, coffin, and transportation.

What *isn't* covered?

These benefits do not cover any expense resulting from the following:

- Travel for the purpose of obtaining medical treatment
- Non-emergency services, supplies or charges
- Care not medically necessary as determined by the Benefit Administrator

- Services, supplies, or charges rendered by a member of Your immediate family.
- Care rendered by other than Hospitals and Physicians
- Care which is experimental/investigative in nature
- Care for any illness or bodily injury that occurs in the course of employment if You are eligible for benefits or compensation in whole or in part, under the provisions of any legislation of any governmental unit (for example – workers compensation coverage). This applies whether or not You claim or recover any benefits or compensation and whether or not You recover losses from a third party.
- Payments to the extent benefits are provided by any governmental agency or unit (except Medicare)
- Care received for which You would have no legal obligation to pay
- Care received in Afghanistan, Burma, El Salvador, Iran, Iraq, Kampuchea, Laos, Lebanon, Nicaragua, North Korea, Vietnam, Yemen, and any other country which may be determined by the U.S. Government from time to time to be unsafe for travel
- Care for any illness or injury suffered due to:
 - Self-inflicted harm
 - Attempted suicide
 - Mental health issues
 - Alcoholism or substance abuse
 - War; military duty; civil disorder
 - Air travel except as a passenger on a licensed aircraft operated by an airline or air charter company
 - Routine physical examinations
 - Hearing aids; eyeglasses or contact lenses
 - Routine dental care, including dentures and false teeth
 - Hernia, unless it results from a covered accident
 - Elective abortion
 - Participation in or attempt at a felonious act
 - Skydiving, scuba, skin, or deep sea diving
 - Hang gliding, parachuting, rock climbing and contests of speed

This benefit also does not cover any expenses provided by another party at no cost to You or already included in the cost of the scheduled Covered Trip on which the illness or injury occurs.

How to File an Emergency Evacuation and Transportation/Repatriation of Remains Claim

1. If You find yourself in a situation where You need an emergency evacuation, transportation or repatriation of remains, immediately notify the Benefits Administrator at **1-800-508-1276**, or call collect outside the U.S. at **1-804-673-6498**. The Benefits Administrator will answer Your questions and send You a claim form.
2. Return the claim form and the requested documentation below within one-hundred and eighty (180) days of the date of the event to the address below:

Card Benefit Services
P.O. Box 72034
Richmond, VA 23255

For *Emergency Evacuation and Transportation* claims, please submit the following documents:

- The completed signed claim form
- A copy of Your monthly billing statement or the travel itinerary (showing the last 4 digits of the Account number) confirming the Common Carrier ticket was charged to the 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 statement from Your insurance carrier (and/or Your employer, or Your employer's insurance carrier) or other coverage showing any amounts they may have paid towards the costs claimed. Or, if You

have no other applicable insurance or coverage, please provide a statement to that effect.

- Copy of medical bills
- Copy of transportation, medical services, and medical supply bills incurred in connection with the Emergency Evacuation
- Copy of Physician's statement describing the need for Emergency Evacuation
- Copy of the original unused return tickets or statement indicating the value of the of the original unused return tickets
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim.

For *Repatriation of Remains* claims, please submit the following documents:

- The completed signed claim form
- A copy of Your monthly billing statement or the travel itinerary (showing the last 4 digits of the Account number) confirming the Common Carrier ticket was charged to the 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.
- Copy of death certificate
- Receipts for embalming, cremation, coffin, and transportation expenses
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim.

Additional Provisions for Emergency Evacuation and Transportation/Repatriation of Remains

- 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.

FORM #EVAC – 2017 (03/18)

EE-O

Auto Rental Collision Damage Waiver

Auto Rental Collision Damage Waiver reimburses You for damages caused by theft or collision -- up to the Actual Cash Value of most rented cars. Auto Rental Collision Damage Waiver covers no other type of loss. For example, in the event of a collision involving Your rented vehicle, damage to any other driver's car or the injury of anyone or anything is not covered. Rental periods of fifteen (15) consecutive days within Your country of residence, and thirty-one (31) consecutive days outside it, are both covered. (Longer rental periods, however, are **not** covered.)

You are eligible for this benefit if Your name is embossed on an eligible card issued in the United States and You use it and/or rewards programs associated with Your covered Account to initiate and complete Your entire car rental transaction. Only You as the primary car renter and any additional drivers permitted by the Rental Car Agreement are covered.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Actual Cash Value** means the amount a Rental Vehicle is determined to be worth based on its market value, age and condition at the time of loss.
- **Eligible Person** means a cardholder who pays for their auto rental by using their eligible Account and/or rewards programs associated with Your covered Account.
- **Rental Car Agreement** means the entire contract an eligible renter receives when renting a Rental Vehicle from a rental car agency which describes in full all of the terms and conditions of the rental, as well as the responsibilities of all parties under the contract.
- **Rental Vehicle** means a land motor vehicle with four or more wheels as described in the participating organization's disclosure statement which the eligible renter has rented for the period of time shown on the Rental Car Agreement and does not have a manufacturer's suggested retail price exceeding the amount shown on the participating organization's disclosure statement.
- **You** or **Your** means an Eligible Person who uses their eligible card and/or rewards programs associated with Your covered Account to initiate and complete the rental car transaction.

How Auto Rental Collision Damage Waiver Works With Other Insurance

Auto Rental Collision Damage Waiver covers theft, damage, valid loss-of-use charges imposed and substantiated by the auto rental company, administrative fees and reasonable and customary towing charges, due to a covered theft or damage to the nearest qualified repair facility.

If You **do** have personal automobile insurance or other insurance that covers theft or damage, this benefit reimburses You for the deductible portion of Your car insurance or other insurance, along with any unreimbursed portion of administrative and loss-of-use charges imposed by the car rental company, as well as reasonable towing charges while the car was Your responsibility.

If You **do not** have personal automobile insurance or any other insurance, the benefit reimburses You for covered theft, damage, or administrative and loss-of-use charges imposed by the rental company, as well as reasonable towing charges that occur while You are responsible for the vehicle.

If You are renting outside of Your country of residence, the coverage provided under this benefit is primary and reimburses You for covered

theft, damage, or administrative and loss-of-use charges imposed by the rental company, as well as reasonable towing charges that occur while You are responsible for the vehicle.

How to Use Auto Rental Collision Damage Waiver

1. Use Your card and/or rewards programs associated with Your covered Account to initiate and complete Your entire car rental transaction.
2. Review the auto rental agreement and decline the rental company's collision damage waiver (CDW/LDW) option, or a similar provision, **as accepting this coverage will cancel out Your benefit.** If the rental company insists that You purchase their insurance or collision damage waiver, **call the Benefit Administrator for assistance at 1-800-348-8472. Outside the United States, call collect at 1-804-673-1164.**

Before You leave the lot, be sure to check the car for any prior damage.

This benefit is in effect during the time the rental car is in Your (or an authorized driver's) control, and it terminates when the rental company reassumes control of their vehicle.

This benefit is available in the United States and most foreign countries **(with the exception of Israel, Jamaica, the Republic of Ireland or Northern Ireland)**. However, this benefit is not available where precluded by law, or where it's in violation of the territory terms of the auto rental agreement, or when prohibited by individual merchants. **Because regulations vary outside the United States, check with Your auto rental company and the Benefit Administrator before You travel, to be sure that Auto Rental Collision Damage Waiver will apply.**

Vehicles Not Covered

Certain vehicles are **not** covered by this benefit, they consist of: expensive, exotic, and antique cars; cargo vans; certain vans; vehicles with an open cargo bed; trucks; motorcycles; mopeds; motorbikes; limousines; and recreational vehicles.

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, Cadillac, 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

***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 of certain states.**

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

Finalizing Your Claim

Your claim will typically be finalized within 15 (fifteen) days, after the Benefit Administrator has received all the documentation needed to substantiate Your claim.

Transference of Claims

Once Your claim has been paid, all Your rights and remedies against any party in regard to this theft or damage will be transferred to the Benefit Administrator, to the extent of the cost of payment made to You. You must give the Benefit Administrator all assistance as may reasonably be required to secure all rights and remedies.

Additional Provisions for Auto Rental Collision Damage Waiver

- 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 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 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.

FORM #VARCDW – 2013 (STAND 04/14)

ARCDW-O

\$100 Global Entry or \$85 TSA Pre✓™ Application Fee Statement Credit

What is this benefit?

Global Entry and TSA Pre✓™ are U.S. government programs.

Please note that TSA Pre✓™ approval does not include Global Entry membership. TSA Pre✓ eligibility is on a flight-by-flight basis with no guarantee.

You can find complete details on the Global Entry or TSA Pre✓ programs, including full terms and conditions, online at <http://www.cbp.gov/global-entry/about>

Who controls this program?

The U. S. federal government controls Global Entry and TSA Pre✓™ programs through U .S . Customs and Border Protection (CBP) (for Global Entry) and Department of Homeland Security (DHS) through the U. S. Transportation Security Administration (TSA) for TSA Pre✓. Visa and Wells Fargo Bank, National Association have no control over the program, including but not limited to:

- Application, approval process or enrollment
- Fees charged by CBP for Global Entry and TSA for TSA Pre✓
- Responsibility to the Global Entry or TSA Pre✓ program

Who is eligible?

Valid Cardholders of an eligible Wells Fargo By Invitation Visa Signature Card can apply. Your account can receive either the \$100 or \$85 statement credit, whichever purchase posts first to your account.

To be eligible, You must apply for TSA Pre✓ or Global Entry and pay the application fee with a valid Wells Fargo By Invitation Visa Signature Card. You pay the application fee even if CBP/TSA denies Your application.

If approved, Your membership is valid for five years without additional charges and subject to the program’s terms and conditions.

How do I use this benefit?

Cardholders with approved Global Entry must add Your Global Entry membership number (PASS ID) in:

- Your participating airline’s frequent flyer profile or
- The “Known Traveler Number” field in Your flight reservation details.

Cardholders with approved TSA Pre✓ must add their Known Traveler Number to Your participating airline’s frequent flyer profile or in the “Known Traveler Number” field in Your reservation details.

You do not need any additional fees or applications to use Your benefit.

How do I receive the benefit?

You can receive the benefit as statement credit for whichever purchase posts first to your account:

Statement Credit Type	Amount
Global Entry	\$100
TSA Pre✓	\$85

You can receive this benefit once every four years. You cannot use this statement credit with any other program applications, including but not limited to:

- NEXU
- Privium
- SENTRI

When Credit Processes

We process Your statement credit once the Global Entry or TSA Pre✓ program application fee charges to Your eligible card. The credit will post to Your account within 6-8 weeks.

Hotel Theft Protection

Hotel Theft Protection can cover You if Your personal property is stolen from Your Hotel/Motel room when You pay for the cost of a room located in the United States or Canada with Your eligible Account and/or with rewards programs associated with Your covered Account. You can receive a one-time payment of up to \$1,000.00 for personal property stolen from Your room. To be eligible for this coverage, You must be a cardholder of an eligible card issued in the United States and charge the room entirely with Your Account and/or rewards programs associated with Your covered Account.

Definitions

- **Account** means Your credit or debit card Accounts.
- **Business Items** means 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.).
- **Check-In** means the moment You register at the Hotel/Motel.
- **Check-Out** means the moment You vacate the Hotel/Motel and pay the itemized total costs incurred for the stay.
- **Eligible Person** means a cardholder who pays for the Hotel/Motel room by using their eligible Account and/or rewards programs associated with their covered Account.
- **Forceful Entry** means that someone illegally accessed Your Hotel/Motel room by breaking in a door, window, or surrounding walls.
- **Hotel/Motel** means an establishment located in the United States or Canada that provides lodging for the general public, and usually meals, entertainment, and various personal services.
- **Hotel Theft** means Forceful Entry into Your premises and You suffer a loss of property.
- **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].
- **You** or **Your** means an Eligible Person or Your Immediate Family Members who charged their trip to Your eligible Account and/or rewards programs associated with Your covered Account.

When does it apply?

The Hotel Theft Protection benefit applies only if:

- There is evidence of Forceful Entry and;
- You make a sworn statement to police authorities having jurisdiction within 24 hours of discovering the Hotel Theft and furnish a copy of that statement with Your claim, and;
- The Hotel/Motel verifies the loss.

The cost of replacing Your personal property (or its depreciated value if

You choose not to replace it) is covered up to a maximum of \$1,000.00 less any amounts paid or payable by the Hotel/Motel or any other insurance, whether the insurance is primary, contributing, excess, or contingent; or any other reimbursement.

Coverage begins each time You Check-In to an eligible Hotel/Motel room, and coverage ends each time You Check-Out of an eligible Hotel/Motel room.

What isn't covered?

This benefit will not provide reimbursement for theft of the following:

- Animals
- Art objects
- Business Items and cellular phones
- Cash, checks, securities, credit cards, debit cards, and other negotiable instruments
- Tickets, documents, keys, coins, deeds, bullion, and stamps
- Perishables and consumables including, but not limited to perfume, cosmetics, and limited-life items such as rechargeable batteries

How to File a Hotel Theft Protection Claim

1. *Notify the Benefit Administrator immediately by calling 1-800-554-1275, or call collect outside the U.S. at 1-804-673-6497.* Notification must be made within twenty (20) days of the date of the incident. The Benefits Administrator will answer Your questions and send You a claim form.
2. Return the claim form and the requested documentation below within ninety (90) days of the date of the incident to the address below:
Card Benefit Services
P.O. Box 72034
Richmond, VA 23255

Please submit the following documents

- The completed signed claim form
- A copy of Your monthly billing statement, Your travel itinerary or the Hotel/Motel receipt confirming that the Hotel/Motel stay was charged to Your covered Account and/or Rewards programs associated with Your covered Account. (must reflect the last 4 digits of Your Account number).
- A copy of any settlement payment or reimbursement made to You from the Hotel/Motel or other collectible insurance/reimbursement showing any amounts they may have paid towards the costs claimed.
- A copy of Your declarations page or Your employer's insurance carrier declarations page [not applicable for claims less than one thousand (\$1,000.00)]
- If You have no other applicable insurance or reimbursement, please provide a statement to that effect [not applicable for claims less than one thousand (\$1,000.00)].
- A copy of the police report
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim.

Additional Provisions for Hotel Theft 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 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.

FORM #HOTBURG – 2017 (04/17)

HMTP-O

For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-554-1275, or call collect outside the U.S. at 1-804-673-6497.

Lost Luggage Reimbursement

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 three thousand dollars (\$3,000.00) 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 eligible card issued in the United States and/or rewards programs associated with Your covered Account. To be eligible for coverage, You must purchase a portion or the entire cost of the Covered Trip with Your covered Account. Only Your Checked Luggage and/or Carry-On Baggage and/or its contents is covered.

This benefit is supplemental to and excess of any collectible insurance and/or collectible reimbursement from any other source. The Benefit Administrator will refund the excess amount once all other reimbursement has been exhausted up the limit of liability.

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.

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 (a) 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 programs 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 programs 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 programs associated with Your covered Account.

What Isn't 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 or 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

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 4 digits of the Account number) confirming a portion of the Common Carrier ticket was charged to the 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.eclaimslines.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.

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 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

FORM #LUGOPT – 2017 (04/17)

LL-3/5-O

Roadside Dispatch®

For roadside assistance, call **1-800-847-2869**

What is Roadside Dispatch?

Roadside Dispatch is a pay-per-use roadside assistance program. The program provides you with security and convenience wherever your travels take you.

No membership or pre-enrollment is required. No annual dues. No limit on usage.

For a set price per service call, the program provides:

- Standard Towing — Up to 5 miles included¹
- Tire Changing — must have good, inflated spare
- Jump Starting
- Lockout Service (no key replacement)
- Fuel Delivery — up to 5 gallons (plus the cost of fuel)
- Standard Winching

Roadside Dispatch will ask you where you are, what the problem is, and while they remain on the phone with you, they will arrange a dispatch to a reliable tow operator or locksmith to provide help. (If you feel you are in an unsafe location – Roadside Dispatch will advise you to hang up and dial 911. If you are not able to dial 911, they will call the non-emergency police number in Your area, and will remain on the phone with you at your request until the police arrive.) You have the convenience of one toll-free phone number and you may save money because their rates are pre-negotiated.

Dependable roadside assistance, 24 hours a day, 7 days a week has never been easier. No membership or pre-enrollment is required. Just call

Roadside Dispatch toll-free when you need them.

1-800-847-2869 ~ It's that easy!

Note: Customers must pay service provider for mileage over 5 miles. A secondary unit being towed behind is not included but can be accommodated for an additional fee. Standard Winching applies within 100 feet of paved or county maintained road only.

Current fee for a standard service call is \$69.95. Additional fees may apply for winching services under certain circumstances. Service call fees are subject to change at any time; however callers will be notified of pricing prior to any service dispatch. This program may be discontinued at any time without prior notice. Program void where prohibited.

¹ Any vehicle with wheels is covered under the program as long as it can be classified as 'Light Duty'. 'Light Duty' vehicles are vehicles that weigh 10,000 lbs. or less. Vehicles weighing more than 10,000 lbs. are considered 'Medium Duty' or 'Heavy Duty' and are NOT covered under this program.

Additional Terms: Service providers supplying emergency roadside assistance and towing are independent contractors and are solely liable for their services. Neither Visa nor Wells Fargo shall have any responsibility or liability in connection with the rendering of the service. Emergency roadside assistance and towing may not be available in areas not regularly traveled, nor in other "off road" areas not accessible by ordinary towing vehicles. Weather conditions, time of day, and availability of service may affect assistance responses. Expectations for dispatch are set with the customer on every call, and an expected estimated time of arrival is provided to the customer regardless of their location; however, neither Visa nor Wells Fargo provides any assurances as to the ability of the Service Provider to meet such estimates. You are responsible for any roadside assistance or towing charges incurred by facilities responding to your request even if you are not with your vehicle or your vehicle is gone upon their arrival. Services provided by United States Auto Club, Motoring Division, Inc.

Trip Cancellation and Interruption

Trip Cancellation and Interruption benefits pay up to \$5,000.00 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.

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 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 step children; 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 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 \$5,000.00.

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 Benefits Administrator or You can call toll free at **1-855-307-9251**. The Benefits 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 Benefits Administrator receives notice of a claim, the Benefits 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 Benefits 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 Benefits 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 purchased using the covered Account and/or rewards programs associated with the 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.
- 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

Additional 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

Covered Loss	Benefit Maximum
Accidental Loss of Life, two or more Members, sight of both eyes, speech and hearing or any combination thereof	\$1,000.00
Accidental Loss of one Member, sight of one eye, speech or hearing	\$500.00
Accidental Loss of the thumb and index finger of the same hand	\$250.00

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.

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 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.

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, please provide claim notice to the Benefits Administrator in writing or You can call toll free at **1-855-307-9251**. The Benefits 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 Benefits Administrator receives notice of a claim, the Benefits 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 Benefits 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 Benefits Administrator:

- A copy of the police report
- 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 for Trip Cancellation/Interruption and Travel Accident Benefit, visit www.myclaimsagent.com and use website code: 001.

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.

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 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.

\$1,000,000.00 Worldwide Automatic Common Carrier Travel Accident Insurance

DEFINITIONS

- **Accident** or **Accidental** means a sudden, unforeseen, and unexpected event which: 1) happens by chance; 2) is independent of illness, disease or other bodily malfunction or medical or surgical treatment thereof; 3) occurs while the Insured Person is insured under this policy which is in force; and 4) is the direct cause of loss.
- **Accidental Bodily Injury** means bodily injury, which is: 1) Accidental; 2) the direct cause of a loss; and 3) occurs while an Insured Person is insured under this policy, which is in force. Accidental Bodily Injury does not include conditions caused by repetitive motion injuries, or cumulative trauma not a result of an Accident, including, but not limited to: 1) Osgood-Schlatter's Disease; 2) bursitis; 3) Chondromalacia; 4) shin splints; 5) stress fractures; 6) tendinitis; and 7) Carpal Tunnel Syndrome.
- **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 coverage.
- **Benefit Amount** means the amount stated which applies: 1) at the time of an Accident; 2) to an Insured Person; and 3) for an applicable Hazard.
- **Cardholder** means an individual who is named on the Account issued by Wells Fargo Bank, N.A.
- **Common Carrier** means any motorized land, water or air Conveyance, operated by an organization other than Wells Fargo Bank, N.A., organized and licensed for the transportation of passengers for hire and operated by an employee or an individual under contract.
- **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 Wells Fargo Bank, N.A.
- **Company** means Federal Insurance Company.
- **Conveyance** means any motorized craft, vehicle or mode of transportation licensed or registered by a governmental authority with competent jurisdiction.
- **Credit Card** means a payment medium that takes the form of a credit card, credit plate, courtesy card or other identification card or device, issued to the Insured Person. The Insured Person may use the Credit Card to purchase, hire, rent or lease property or services. Credit Card does not include a Debit Card.
- **Debit Card** means a payment medium that takes the form of a card, plate or other identification card or device issued to the Insured Person who is an owner of a deposit Account maintained by the issuer. The Insured Person may use the Debit Card to purchase, hire, rent or lease property or services. Debit Card does not include a Credit Card.
- **Dependent Child** means a 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 a Primary Insured Person or a child for whom the Primary Insured Person or Spouse has been named legal guardian. The Dependent Child must be primarily dependent upon such Primary Insured Person for maintenance and support and must be: 1) under the age of 25; or 2) classified as an Incapacitated Dependent Child.
- **Immediate Family Member** means an 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.

- **Incapacitated Dependent Child** means a child who, as a result of being mentally or physically challenged, is permanently incapable of self-support and permanently dependent on the Primary Insured Person for support and maintenance. The incapacity must have occurred while the child was: 1) under the age of 19; or 2) under the age of 25 if enrolled as a full-time student and enrolled in an Institution of Higher Learning.
- **Insured Person** means a person, qualifying as a Class member: 1) who elects insurance; or 2) for whom insurance is elected, 3) and on whose behalf premium is paid.
- **Loss** means Accidental: Loss of Foot, Loss of Hand, Loss of Hearing, Loss of Life, Loss of Sight, Loss of Sight of One Eye, Loss of Speech, Loss of Thumb and Index Finger. Loss must occur within one (1) year after the Accident.
- **Loss of Foot** means the complete severance of a foot through or above the ankle joint. We will consider such severance a Loss of Foot even if the foot is later reattached. If the reattachment fails and amputation becomes necessary, then We will not pay an additional Benefit Amount for such amputation.
- **Loss of Hand** means complete severance, as determined by a Physician, of at least four (4) fingers at or above the metacarpal phalangeal joint on the same hand or at least three (3) fingers and the thumb on the same hand. We will consider such severance a Loss of Hand even if the hand, fingers or thumb are later reattached. If the reattachment fails and amputation becomes necessary, then We will not pay an additional Benefit Amount for such amputation.
- **Loss of Hearing** means permanent, irrecoverable and total deafness, as determined by a Physician, with an auditory threshold of more than 90 decibels in each ear. The deafness cannot be corrected by any aid or device, as determined by a Physician.
- **Loss of Life** means death, including clinical death, as determined by the local governing medical authority where such death occurs within 365 days after an Accident.
- **Loss of Sight** means permanent loss of vision. Remaining vision must be no better than 20/200 using a corrective aid or device, as determined by a Physician.
- **Loss of Sight of One Eye** means permanent loss of vision of one eye. Remaining vision in that eye must be no better than 20/200 Using a corrective aid or device, as determined by a Physician.
- **Loss of Speech** means the permanent, irrecoverable and total loss of the capability of speech without the aid of mechanical devices, as determined by a Physician.
- **Loss of Thumb and Index Finger** means complete severance, through the metacarpal phalangeal joints, of the thumb and index finger of the same hand, as determined by a Physician. We will consider such severance a Loss of Thumb and Index Finger even if a thumb, an index finger or both are later reattached. If the reattachment fails and amputation becomes necessary, then We will not pay an additional Benefit Amount for such amputation.
- **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) an Insured Person; 2) an Immediate Family Member.

- **Proof of Loss** means written evidence acceptable to Us that an Accident, Accidental Bodily Injury or Loss has occurred.
- **Spouse** means an Insured Person's husband or wife or 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, Us and Our** means Federal Insurance Company.

ELIGIBILITY: This travel insurance plan is provided to Wells Fargo Advisors By Invitation Visa Signature Credit Card cardholders, of Wells Fargo Bank, N.A., automatically when the entire cost of the passenger fare(s) are charged to the Wells Fargo Advisors By Invitation Visa Signature Credit Card account while the insurance is effective. This plan is provided at no additional cost to eligible Wells Fargo Advisors By Invitation Visa Signature Credit Card cardholders of Wells Fargo Bank, N.A. It is not necessary for you to notify Wells Fargo Bank, N.A., the administrator, or the Company when tickets are purchased.

EFFECTIVE DATE: This insurance is effective on the date that you become a Wells Fargo Advisors By Invitation Visa Signature Credit Card cardholder, and will cease on the date the coverage is terminated or on the date your Wells Fargo Advisors By Invitation Visa Signature Credit Card account ceases to be in good standing, whichever occurs first.

DATE INSURANCE ENDS: Insurance for the Insured Person automatically terminates on the earliest of: 1) the termination date of this coverage; 2) the expiration of the period for which required premium has been paid for such Insured Person; 3) the date on which a person no longer meets the eligibility criteria as the Insured Person; or 4) the date on which We pay out 100% of the Benefit Amount.

BENEFITS: ***We will pay the applicable Benefit Amount of \$1,000,000.00 if an Accident results in a covered Loss not otherwise excluded. The Accident must occur while an Insured Person is insured under this policy, while it is in force. The covered Loss must occur within one (1) year after the Accident. Insured Person's are covered while riding as a passenger in, entering or exiting any licensed Common Carrier, provided the entire cost of the passenger fare(s), less redeemable certificates, vouchers or coupons, has been charged to your Wells Fargo Advisors By Invitation Visa Signature Credit Card account. If the entire cost of the passenger fare has been charged to your Wells Fargo Advisors By Invitation Visa Signature Credit Card account prior to departure for the airport, terminal or station, coverage is also provided for Common Carrier travel (including taxi, bus, train or airport limousine, including courtesy transportation); immediately, a) preceding your departure, directly to the airport, terminal or station b) while at the airport, terminal or station, and c) immediately following your arrival at the airport, terminal or station of your destination. If the entire cost of the passenger fare has not been charged prior to your arrival at the airport, terminal or station, coverage begins at the time the entire cost of the travel passenger fare is charged to your Wells Fargo Advisors By Invitation Visa Signature Credit Card account.***

100% of the Benefit Amount is payable for Accidental: Loss of Life; Loss of Speech and Loss of Hearing; Loss of Speech and one of: Loss of Hand, Foot or Sight of One Eye; Loss of Hearing and one of: Loss of Hand, Foot or Sight of One Eye; Loss of both Hands, both Feet, loss of Sight or any combination thereof; 50% of the Benefit Amount is payable for Accidental: Loss of Hand, Foot or Sight of One Eye (any one of each);

Loss of Speech or Loss of Hearing; **25%** of the Benefit Amount is payable for Accidental: Loss of Thumb and Index Finger of the same hand.

If an Insured Person suffers multiple Losses as the result of one Accident, then We will only pay the single largest Benefit Amount applicable to all such Losses.

EXCLUSIONS: This policy does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing the insurance. In addition no benefits will be paid for any Accident caused by or resulting from any of the following:

1) an Insured Person riding as a passenger in, entering, or exiting any aircraft while acting or training as a pilot or crew member. (This exclusion does not apply to passengers who temporarily perform pilot or crew functions in a life threatening emergency.); **2)** an Insured Person's emotional trauma, mental or physical illness, disease, pregnancy, childbirth or miscarriage, bacterial or viral infection, bodily malfunctions or medical or surgical treatment thereof. (This exclusion does not apply to an Insured Person's bacterial infection caused by an Accident or by Accidental consumption of a substance contaminated by bacteria.); **3)** an Insured Person's commission or attempted commission of any illegal act, including but not limited to any felony; **4)** any occurrence while an Insured Person is incarcerated after conviction; **5)** an Insured Person being voluntarily intoxicated, while driving a vehicle at the time of an Accident. Intoxication is defined by the laws of the jurisdiction where such Accident occurs; **6)** an Insured Person being under the influence of any narcotic unless administered on the advice of a Physician; **7)** an Insured Person participating in parachute jumping from an aircraft; **8)** an Insured Person being engaged in or participating in an organized motorized vehicular race or speed contest; **9)** an Insured Person participating in military action while in active military service with the armed forces of any country or established international authority. (This exclusion does not apply to the first 60 consecutive days of active military service with the armed forces of any country or established international authority.); **10)** an Insured Person traveling or flying on any a) flight on a rocket propelled or rocket launched aircraft, or b) flight which requires a special permit or waiver from a governmental authority having jurisdiction over civil aviation, whether or not such permit or waiver is granted; **11)** an Insured Person's suicide, attempted suicide or intentionally self-inflicted injury; **12)** a declared or undeclared War.

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

CLAIMS PAYMENT PROVISIONS:

Claim Notice: Written claim notice must be given to the Company 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.

Claim Forms: To obtain a claim form contact the Claim Administrator at **1-855-830-3722**. Complete all items on the required claim form, attach all appropriate documents, and mail to; Broadspire, a Crawford company, P.O. Box 792190, San Antonio, TX 78279. Reference policy # 9906-98-50. Claims documents may also be submitted via Myclaimsagent.com or fax to **1-855-830-3728**. When the Company receives notice of a claim, the Company will send You forms for giving proof of Loss to us within fifteen (15) days. If You do not receive the forms, You should send the Company a written description of the Loss.

Claim Proof of Loss: complete proof of loss must be given to us within 90 days after the date of loss, or as soon as reasonably possible.

Claim Payment: The Company will pay you or your beneficiary the applicable benefit amount within 30 days after complete proof of loss is received and if you, the Policyholder and/or the beneficiary have complied with all the terms of this policy.

GOVERNING JURISDICTION AND CONFORMANCE WITH STATUTES: This policy is governed by the laws of the jurisdiction in which it is delivered to the Policyholder. Any terms of this policy which are in conflict with the applicable statutes, laws or regulations of the jurisdiction in which this policy is delivered are amended to conform to such statutes, laws or regulations. Any terms of a Description of Coverage which are in conflict with the applicable statutes, laws or regulations of the jurisdiction in which the Description of Coverage is delivered are amended to conform to the statutes, laws or regulations of the jurisdiction.

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. If this plan does not conform to your state statutes, it will be amended to comply with such laws. If a statement in this description of coverage and any provision in the policy differ, the policy will govern.

Questions: Answers to specific questions can be obtained by writing to the **Plan Administrator:**

cbsi Card Benefit Services
550 Mamaroneck Avenue
Harrison, NY 10528

Plan Underwritten By



Federal Insurance Company
a member insurer of the
Chubb Group of Insurance Companies
202A Hall's Mill Road
Whitehouse Station, NJ 08889

FORM NO. FS634L

Wells Fargo Bank, N.A., is a banking affiliate of Wells Fargo & Company.

Wells Fargo Advisors is a trade name used by Wells Fargo Clearing Services, LLC, a registered broker-dealer and non-bank affiliate of Wells Fargo & Company.

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