# Visa® Gold Credit Card Disclosure Guide

***Your Guide to Benefit describes the benefit in effect as of 4/1/17 Benefit information in this guide replaces any prior benefit information You may have received. Please read and retain for Your records. Your eligibility is determined by Your financial institution.***

# Emergency Medical/Dental Coverage

*Needing emergency medical or dental treatment during Your travel is something You don't want to have to worry about, but when it happens, it is good to know that there is help with some of Your covered expenses.*

It can be an overwhelming and expensive experience when You are dealing with an emergency away from Your home. To try and help ease some of the financial burden, You can receive coverage if You, Your spouse, or dependent children require Emergency Treatment while on a Covered Trip.

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 with rewards program 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 program 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 with 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.

## 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 is *not* 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 rendered 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

**CLAIMS SNAPSHOT**

You used Your covered Account to purchase Your airline tickets

You broke Your ankle while on a Covered Trip overseas and received medical care from a local hospital

**90 DAYS**

Benefits Administrator must be notified of occurrence

**180 DAYS**

Claim form must be submitted with supporting documents

Claim settled

- 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 outside the U.S. call collect 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 four [4] digits of the Account number) confirming the Common Carrier ticket was charged to Your covered Account and/or rewards program associated with Your covered Account
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- A 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 or dental expenses
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim

## 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 program associated with Your covered Account.

## 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.

**For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-628-8472.**

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# Hotel Theft Protection

*Having personal items stolen from Your Hotel room can ruin an experience and leave You with an additional financial burden.*

Fortunately, with Hotel Theft Protection You can be covered 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 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.

## 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 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 is *not* 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 four [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

**CLAIMS SNAPSHOT**

Use Your covered Account to pay for the cost of Your Hotel/Motel room.

Someone broke into Your Hotel room through the window and stole Your personal laptop

**20 DAYS**

Benefits Administrator must be notified of the incident

**90 DAYS**

Claim form must be submitted with supporting documents

Claim settled

## 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.

## 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.

**For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-628-8472.**

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# Lost Luggage Reimbursement

*Have You ever been waiting for Your Checked Luggage to come around the belt only to find that it has been lost by Your airline?*

Fortunately, Lost Luggage Reimbursement is here to help. With Lost Luggage Reimbursement, You can be reimbursed for the difference between the "value of the amount claimed" and the Common Carrier's payment up to **one thousand two hundred and fifty dollars ($1,250.00) per Covered Trip,** provided the Checked Luggage 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 program 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 and/or rewards program associated with Your covered Account. Only Your Checked Luggage and/or its contents are 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 to the limit of liability.

**Please Note:** You must take all reasonable means to protect, save and/or recover Your Checked Luggage and/or its contents at all times.

## What is *not* covered?

Luggage Reimbursement does not apply to loss or theft of the following items:

- Automobiles, automobile accessories and/or equipment, motorcycles, motors, bicycles (except when checked with the Common Carrier), boats, or other vehicles or conveyances
- Contact lenses, eyeglasses, sunglasses, hearing aids, artificial teeth, dental bridges, and prosthetic limbs
- Money, securities, credit or debit cards, checks, and travelers' checks
- Tickets, documents (travel or otherwise), keys, coins, deeds, bullion, stamps, perishables, consumables, perfume, cosmetics, rugs and carpets, animals, cameras, sporting equipment, and household furniture
- Property shipped as freight or shipped prior to 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:

**CLAIMS SNAPSHOT**

You purchase a flight using Your covered Account

The airline loses Your Checked Luggage from Your scheduled flight

**20 DAYS**

Benefits Administrator must be notified of the incident

**90 DAYS**

Claim form must be submitted with supporting documents

Claim settled

- A copy of Your monthly billing statement or the travel itinerary (showing the last four [4] digits of the Account number) confirming the Common Carrier ticket was charged to the covered Account and/or rewards program associated with Your covered Account
- If more than one method of payment was used, please provide documentation as to additional currency, voucher, points or any other payment method utilized
- A copy of ticketing by the Common Carrier, including but not limited to itinerary, boarding pass, or used ticket stub
- A copy of any check, settlement, denial or explanation of coverage issued by the Common Carrier together with a copy of the Common Carrier's completed claim form, a list of the items lost and their value, and a copy of the luggage claim check (if applicable)
- A copy of Your insurance policy's Declarations Page (if applicable) to confirm Your deductible. Declarations Page means the document(s) in Your insurance policy that lists names, coverages, limits, effective dates and deductibles
- A copy of any settlement of the loss or theft from Your primary insurance
- Any other documentation deemed necessary by the Benefit Administrator to substantiate the loss or theft

For faster filing or to learn more about Lost Luggage Reimbursement visit **www.eclaimsline.com.**

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

If the claim amount is within Your personal insurance deductible, the Benefit Administrator may, at its discretion, deem a copy of Your personal insurance Declarations Page to be sufficient.

## Transference of claims

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

## Definitions

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

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

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

**Covered Trip** means a trip while the Eligible Person is riding on a Common Carrier as a passenger and not as a pilot, operator or crew member, for which the expense has been charged to Your eligible Account and/or rewards 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 domestic partner which is a person who is at least 18 years of age and who during the last twelve months: (1) has been in a committed relationship with the cardholder; (2) has been the cardholder's sole spousal equivalent; (3) has resided in the same household as the cardholder; and (4) has been jointly responsible with the cardholder for each other's financial obligations and who intends to continue the relationship as stated above indefinitely.

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

## Additional provisions for 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.

**For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-628-8472.**

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# 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 included*
- 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.

*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 Yolo FCU 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 Yolo FCU 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. 24-hour roadside assistance services provided by: Cross Country Motor Club, Inc. d/b/a Agero, a Massachusetts corporation, and Cross Country Motor Club of California, Inc. a California corporation.

**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.**

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# Travel Accident Insurance Description of Coverage

*This Description of Coverage is provided to all eligible* **Visa® Gold** *cardholders and replaces any and all Descriptions of Coverage previously issued to the insured with respect to insurance described herein.*

**Principal Sum: $300,000**

**THIS IS AN ACCIDENTAL DEATH AND DISMEMBERMENT ONLY POLICY AND DOES NOT PAY BENEFITS FOR LOSS FROM SICKNES**

## Eligibility and Period of Coverage

As a **Visa Gold** cardholder, you are covered beginning on **April, 1, 2010** or the date your credit card is issued, whichever is later.

You and your dependents* become covered automatically when the entire Common Carrier fare is charged to your covered **Visa Gold** card account ("Covered Person"). It is not necessary to notify the financial institution, the Insurance Company, or the Plan Administrator when tickets are purchased. Coverage ends when the policy is terminated.

*Your spouse, unmarried dependent child(ren), under age 19 (25 if a full-time student). No age limit for incapacitated child. Incapacitated child means a child incapable of self-sustaining employment by reason of mental retardation or physical handicap, and chiefly dependent on you for support and maintenance. Dependent child(ren) receive fifty percent (50%) of your benefit amount.

## Benefits

Subject to the terms and conditions, if a Covered Person's accidental bodily Injury occurs while on a Covered Trip and results in any of the following Losses within one (1) year after the date of the accident, the Insurance Company will pay the following percentage of the Principal Sum for accidental Loss of:

| | |
|---|---|
| Life | 100% |
| Both hands or both feet | 100% |
| Sight of both eyes | 100% |
| One hand and one foot | 100% |
| Speech and Hearing | 100% |
| One hand or one foot and the sight of one eye | 100% |
| One hand or one foot | 50% |
| Sight of one eye | 50% |
| Speech or hearing | 50% |
| Thumb and index finger on the same hand | 25% |

In no event will multiple charge cards obligate the Insurance Company in excess of the stated benefit for any one Loss sustained by a Covered Person as a result of any one accident. The maximum amount payable for all Losses due to the same accident is the Principal Sum.

## Definitions

**Loss** means actual severance through or above the wrist or ankle joints with regard to hands and feet; entire and irrevocable loss of sight, speech or hearing; actual severance through or above the metacarpophalangeal joints with regard to thumb and index fingers. The life benefit provides coverage in the event of a Covered Person's death. If a Covered Person's body has not been found within one (1) year of disappearance, stranding, sinking, or wreckage of any Common Carrier in which the Covered Person was covered as a passenger, then it shall be presumed, subject to all other provisions and conditions of this coverage, the Covered Person suffered loss of life.

**Injury** means bodily injury or injuries, sustained by the insured person which are the direct cause of Loss, independent of disease cause of Loss, independent of disease or bodily infirmity, and occurring while the Covered Person is covered under this policy, while the insurance is in force.

**Covered Trip** means a trip (a) while the Covered Person is riding on a Common Carrier as a passenger and not as a pilot, operator, or crew member and (b) charged to your **Visa Gold** card; and (c) that begins and ends at the places designated on the ticket purchased for the trip. Covered Trip will also include travel on a Common Carrier (excluding aircraft), directly to, from, or at any Common Carrier terminal, which travel immediately precedes departure to or follows arrival at the destination designated on the ticket purchased for the Covered Trip.

**Common Carrier** means any scheduled airline, land, or water conveyance licensed for transportation of passengers for hire.

**CLAIMS SNAPSHOT**

You purchase your entire Common Carrier fare with your covered card

While traveling on your Covered Trip you have an accidental bodily injury which results in a loss

**20 DAYS**

Written notice of claim should be mailed to the Plan Administrator

Claim settled

**Exclusions:** No payment will be made for any Loss that occurs in connection with, or is the result of: (a) suicide, attempted suicide, or intentionally self-inflicted injury; (b) any sickness or disease; (c) travel or flight on any kind of aircraft or Common Carrier except as a fare-paying passenger in an aircraft or on a Common Carrier operated on a regular schedule for passenger service over an established route; or (d) war or act of war, whether declared or undeclared.

**Beneficiary:** Benefit for Loss of life is payable to your estate, or to the beneficiary designated in writing by you. All other benefits are payable to you.

**Notice of Claim:** Written notice of claim, including your name and reference to **Visa Gold** should be mailed to the Plan Administrator within twenty (20) days of a covered Loss or as soon as reasonably possible. The Plan Administrator will send the claimant forms for filing proof of Loss.

**The Cost:** This travel insurance is purchased for you by your financial institution.

**Description of Coverage:** This description of coverage details material facts about a Travel Accident Insurance Policy which has been established for you and is underwritten by Virginia Surety Company, Inc. Please read this description carefully. All provisions of the plan are in the master policy form number, VSC-VCC-01 (2/00). Any difference between the policy and this description will be settled according to the provisions of the policy.

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

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

**Underwritten by:**

Virginia Surety Company, Inc.
175 West Jackson Blvd.
Chicago, IL 60604

## Additional Provisions for Travel Accident Insurance

Travel Accident Insurance is provided under a master policy of insurance issued by Virginia Surety Company, Inc. (herein referred to as Company). We reserve the right to change the benefits and features of all these programs.

The financial institution or the Company can cancel or choose not to renew the Insurance coverages for all Insureds. If this happens, the financial institution will notify the accountholder at least 30 days in advance of the expiration of the policy. Such notices need not be given if substantially similar replacement coverage takes effect without interruption and is provided by the same insurer. Insurance benefits will still apply to Covered Trips commenced prior to the date of such cancellation or non-renewal, provided all other terms and conditions of coverage are met. Travel Accident Insurance does not apply if your **Visa Gold** privileges have been suspended or cancelled. However, insurance benefits will still apply to Covered Trips commenced prior to the date that your account is suspended or cancelled provided all other terms and conditions of coverage are met.

Coverage will be void if, at any time, the accountholder has concealed or misrepresented any material fact or circumstance concerning this coverage or the subject thereof or the accountholder's interest herein, or in the case of any fraud or false swearing by the Insured relating thereto. No person or entity other than the accountholder shall have any legal or equitable right, remedy, or claim for insurance proceeds and/or damages under or arising out of this coverage.

No action at law or in equity shall be brought to recover on this coverage prior to the expiration of sixty (60) days after proof of Loss has been furnished in accordance with the requirements of this Description of Coverage.

The Company, at its expense, has the right to have you examined as often as reasonably necessary while a claim is pending. The Company may also have an autopsy made unless prohibited by law.

## State Amendments

**For Illinois Residents Only:** The following statement is added: If a Covered Person recovers expenses for sickness or injury that occurred due to the negligence of a third party, the Company has the right to first reimbursement for all benefits the Company paid from any and all damages collected from the negligent third party for those same expenses whether by action at law, settlement, or compromise, by the Covered Person, the Covered Person's parents if the Covered Person is a minor, or the Covered Person's legal representative as a result of that sickness or injury. You are required to furnish any information or assistance, or provide any documents that we may reasonably require in order to exercise our rights under this provision. This provision applies whether or not the third party admits liability.

**For more information about the benefit described in this guide, call the Benefit Administrator at 1-800-628-8472.**

***Your Guide to Benefit describes the benefit in effect as of 4/1/21 Benefit information in this guide replaces any prior benefit information You may have received. Please read and retain for Your records. Your eligibility is determined by Your financial institution.***

# Visa® Account Updater

*Avoid payment interruptions when your card number changes.*

Saving your card number with billers and merchants makes paying quicker and easier. But when your card number or other payment information changes and your card is reissued, it can be a hassle to update it.

## With Visa Account Updater (VAU), you can often:

- Skip the hassles of updating your payment information.
- Avoid declined payments and service interruptions.
- Count on Yolo Federal Credit Union to keep your card information secure.

## What is Visa Account Updater?

VAU is a free service to Visa cardholders that provides a way for issuers to securely communicate the most recent cardholder account (card number and expiration date) information to Visa. Participating Card-on-File (COF) merchants use this to verify cardholder information prior to the next billing cycle* and before processing recurring customer payments. Examples include subscription services (such as Netflix) and utility companies.

With VAU, cardholders will no longer have to provide updated card information to participating COF merchants when their card is reissued due to normal expiration or if it is lost or stolen. Updated card information is available within two (2) business days after the card number or expiration date changes. This means recurring payments are more likely to be successful because the outdated card information is automatically updated.

## Discontinue or opt-out of VAU

Cardholders may opt-out of VAU at any time by contacting their financial institution and submitting the opt-out form.

## Merchant Verification

Not all merchants subscribe to VAU. To verify if a specific merchant has elected to participate, contact the merchant(s) directly. Participation in this service is at the merchant's discretion and not shared with Financial Institutions.

*Updates are not guaranteed before the next billing cycle.

**For more information about the benefit described in this guide, contact the Member Service Center at 530-668-2700.**