

Worldwide Travel Inconvenience Insurance: Provides coverage in excess of other insurance for reimbursement due to a travel inconvenience caused by lost or damaged Baggage. Coverage applies to common carrier travel where the ticket was purchased on the Card Account.

Benefit Information:

Toll Free: 855-327-1424
Worldwide Collect: 630-694-9774

Claim Information:

Phone Number: 855-231-2867
Fax Number: 855-830-3728

Terms and Conditions

Worldwide Travel Inconvenience Insurance Description of Coverage

Certain limitations and exclusions apply.

Summary of Coverage: These coverages are provided through Excess Common Carrier Checked and/or Carry-on Baggage, Policy Number 9907-42-38.

Definitions you should know: **Baggage** means suitcases and the containers specifically designated for carrying personal property, and the personal property contained therein. **Carry-On Baggage** means suitcases or other containers specifically designated for carrying personal property, which are carried on board a Common Carrier or Scheduled Airline by the Insured Person. **Checked Baggage** means suitcases or other containers specifically designated for carrying personal property, for which a claim check has been issued to the Insured Person by a Common Carrier. **Common Carrier** means any motorized land, water or air Conveyance, operated by an organization other than the Policyholder, organized and licensed for the transportation of passengers for hire and operated by an employee or an individual under contract. Common Carrier does not include helicopters, travel on cruise ships that extends beyond forty-eight (48) hours, sightseeing tours or any Conveyance used for recreational activities. **Common Carrier Covered Trip** means travel on a Common Carrier when the entire cost of the passenger fare for such transportation, less redeemable certificates, vouchers, coupons, frequent flier points or rewards points has been charged or debited to an Insured Person's Account. Coverage also includes travel on a Common Carrier when the entire cost of the passenger fare is paid for by frequent flier points or rewards points provided that all of the points were accumulated on that Card Account. **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. The Dependent Child must be primarily dependent upon such Primary Insured Person for maintenance and support, and must be: 1) under the age of nineteen (19); 2) under the age of twenty-five (25) if enrolled as a full-time student at an Institution of Higher Learning ; or 3) classified as an Incapacitated Dependent Child. If a Dependent Child under the age of twenty-five (25) is enrolled as a full-time student and is unable to continue as a full-time student due to a medical condition, coverage will continue in force for twelve (12) months from the date the Dependent Child is no longer a full-time student or until the Dependent Child attains the age of twenty-five (25), whichever occurs first. The Dependent Child's treating physician must certify that the withdrawal as a full-time student is medically necessary. **Domestic Partner** means a person designated by the Primary Insured Person who is registered as a Domestic Partner or legal equivalent under laws of the governing jurisdiction or who: 1) is at least 18 years of age and competent to enter into a contract; 2) is not related to the Primary Insured Person by blood; 3) has exclusively lived with the Primary Insured Person for at least twelve (12) consecutive months prior to the date of enrollment; 4) is not legally married or separated; and 5) as of the date of enrollment, has with the Primary Insured Person at least two (2) of the following financial arrangements: a) a joint mortgage or lease; b) a joint bank account; c) joint title to or ownership of a motor vehicle or status as a joint lessee on a motor vehicle lease; or d) a joint credit Card account with a financial institution. Neither the Primary Insured Person nor the Domestic Partner can be married to, nor in a civil union with, anyone else. **Immediate Family Member** means the Insured Person's: 1) Spouse or Domestic Partner; 2) children including adopted children or stepchildren; 3) legal guardians or wards; 4) siblings or siblings-in-law; 5) parents or parents-in-law; 6) grandparents or grandchildren; 7) aunts or uncles; 8) nieces and nephews. Immediate Family Member also means a Spouse's or Domestic Partner's children, including adopted children or stepchildren; legal guardians or wards; siblings or siblings-in-law; parents or parents-in-law; grandparents or grandchildren; aunts or uncles; nieces or nephews. **Spouse** means the Insured Person's husband or wife who is recognized as such by the laws of the jurisdiction in which the Primary Insured Person resides.

The Plan: As an eligible Cardmember, you, your spouse or Domestic Partner and Unmarried Dependent Children are eligible to receive reimbursement for amounts paid for direct physical loss or damage to Checked and/or Carry-On Baggage and Insured's personal Property contained therein. Reimbursement for Checked and/or Carry-On Baggage will be on an Actual

Cash Value basis at the time of loss.

Eligibility: This reimbursement insurance is provided to you, your spouse or Domestic Partner and Unmarried Dependent Children, automatically as a US Bank Elan Premier Rewards American Express Cardmember whose Card contains the following BIN: 377639, 379531, 379979. It is not necessary for you to notify your Bank, the administrator or the Federal Insurance Company, (the “Company”) at the time the passage fee is purchased.

This Checked/Carry-On Baggage reimbursement is provided during a Common Carrier Covered Trip for direct physical loss or damage to the Baggage and personal property contained therein. We will not reimburse for Checked Baggage and/or Carry-On Baggage unless the loss or damage was reported by the Insured Person to the Common Carrier immediately upon disembarking from the Common Carrier. Proof of submission of the loss or damage report to the Common Carrier must be provided. With respect to Jewelry and Watches, and Cameras, Video Recorders and other electronic equipment, Our payment is limited to the Benefit Amount as shown in Section IV-C of the Schedule of Benefits. We will not reimburse the Insured Person for loss of documents or valuable papers, money, securities, tickets, checks, travelers checks or furs.

The Checked Baggage and Carry-On Baggage Benefits are excess over any other insurance (including homeowners) or indemnity (including any reimbursements by the airline, cruise line, railroad, station authority, occupancy provider) available to the Insured Person. For Checked Baggage and Carry-On Baggage Benefit, Our liability will be the actual cash value (replacement cost less depreciation) of the articles at the time of loss.

The Cost: This coverage is provided at no additional cost to eligible Insureds under the Master Policy #9907-42-38 issued to American Express Travel Related Services Company, Inc. by Federal Insurance Company (the “Company”).

Amount of Insurance:

Checked Baggage and Carry-On Baggage

Benefit Amount: \$3,000

Jewelry and Watches Sublimit: \$250

Cameras, Video Recorders and other Electronic equipment Sublimit: \$250

The Benefit Amounts shown above for Jewelry and Watches and for Cameras, Video Recorders and other Electronic equipment are part of and not in addition to the Maximum Benefit Amount for Checked Baggage. Payment of these Benefit Amounts reduces and does not increase the Maximum Benefit Amount for Checked Baggage.

Exclusions: Fraud This insurance does not apply to: 1) a counterfeit Scheduled Airline or Amtrak Train ticket; or 2) a Scheduled Airline or Amtrak Train ticket which is charged to a fraudulently issued or fraudulently used Account Card. Illegal Acts This insurance does not apply to any Loss of Property caused by or resulting from, directly or indirectly, the Insured Person’s commission or attempted commission of a felony or engaging in an illegal occupation. Trade Sanctions This insurance does not apply to any Covered Loss or Loss of Property when: 1) the United States of America has imposed any trade or economic sanctions prohibiting insurance of any Covered Loss or Loss of Property; or 2) there is any other legal prohibition against providing insurance for any Covered Loss or Loss of Property. War This insurance does not apply to any Covered Loss or Loss of Property caused by or resulting from, directly or indirectly, a declared or undeclared War.

Length of Coverage: This plan is effective the date your Card account becomes eligible and will cease on the date the master policy terminates (in which case you will be notified by US Bank), or on the date you no longer qualify as an eligible Insured or on the expiration date of any applicable period of coverage for any Insured.

Misrepresentation and Fraud: Coverage of the Insured will be void if, at any time, the Insured has concealed or misrepresented any material fact or circumstance concerning this coverage or the subject thereof or the interest of the Insured herein, or in case of any fraud or false swearing by the Insured relating thereto.

Claim Procedure: The Insured must send the Company written notice of a claim, including the Insured’s name and policy number, within 45 days after a covered loss occurs. If notice cannot be given within that time, it must be given as soon as reasonably possible. To file a sworn “Proof of Loss” statement, the Insured must send the following to the Company or its authorized representative: (1) a copy of the Card account statement showing the Common Carrier fare charged; (2) a copy of the initial claim report submitted to the Common Carrier; (3) proof of submission of the loss to and the results of any settlement by the Common Carrier; (4) proof of submission of the loss to and the results of any settlement or denial by the Insured’s personal insurance carrier(s); (5) if no other insurance is applicable, a notarized statement from the Insured to that effect; and (6) evidence that the personal property has actually been replaced. Claims inquiries may be directed to 855-231-2867.

To File a Claim: To obtain a claim form contact the Claim Administrator, Broadspire, a Crawford Company. Complete all items on the required claim form, attach all appropriate documents, and mail or fax to: Broadspire, a Crawford Company P.O. Box 459084, Sunrise, FL 33345, PHONE NUMBER 855-231-2867 Fax Number 855-830-3728.

As a handy reference guide, please read this document and keep it in a safe place with your other insurance documents. This information is a brief description of the important features of this insurance plan. It is not an insurance contract. Insurance underwritten and provided by Federal Insurance Company, a Chubb company. Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. All products may not be available in all states or certain terms may be different where required by state law. This communication contains product summaries only. Coverage is subject to the language of the policies as actually issued. Complete provisions pertaining to this plan of insurance are contained in Master Policy #9907-42-38, Excess Common Carrier Checked and/or Carry-on Baggage, on file with American Express Travel-Related Services, Inc. herein referred to as the Policyholder. The benefits of the Policy providing your coverage are governed primarily by the law of a state other than Florida. If this plan does not conform to your state statutes, it will be amended to comply with such laws. If a statement in this Summary of Coverage and any provision in the policy differ, the policy will govern.

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