

Financial Services Common Carrier Trip Cancellation/Trip Interruption

The cancellation or interruption of a Common Carrier Trip Cancellation or Trip Interruption. We will pay up to \$1,000. In no event will We pay more than either: 1) the actual Non-Refundable amount paid by the Insured Person for a Common Carrier passenger fare(s); or 2) \$1,000. **Trip Cancellation** means the cancellation of Common Carrier travel arrangements when the Insured Person is prevented from traveling on a Common Carrier Covered Trip on or before the departure of the Covered Trip. **Trip Interruption** means the interruption of the Insured Person's Covered Trip either on the way to the point of departure or after departure of the Covered Trip.

The Insured Person will relinquish to us any unused vouchers, tickets, coupons or travel privileges for which we have reimbursed the Insured Person. The Trip Cancellation or Trip Interruption of the Insured Person must be caused by or result from death, accidental injury, disease or physical illness of the Insured Person or an Immediate Family Member of the Insured Person. Accidental Bodily Injury or Loss has occurred if Specialized Aviation Activity means use of a properly certified aircraft for flight on a rocket propelled or rocket launched aircraft. Specialized Aviation Activity shall include any 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. **Spouse** means your husband or wife who is recognized as such by the laws of the jurisdiction in which the primary insured person resides. **We, Us and Our** means Federal Insurance Company.

EXCLUSIONS: (applicable to all benefits): This insurance does not apply to any Accident, Accidental Bodily Injury, Loss, Covered Loss or Loss of Property when: 1) the United States of America has imposed any trade or economic sanctions prohibiting insurance of any Accident, Accidental Bodily Injury, Loss, Covered Loss or Loss of Property; or 2) there is any other legal prohibition against providing insurance for any Accident, Accidental Bodily Injury, Loss, Covered Loss or Loss of Property. Additionally, this insurance does not apply to any Accident, Accidental Bodily Injury or Loss caused by or resulting from, directly or indirectly, the Insured Person: 1) 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) the 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 the Insured Person's bacterial infection caused by an Accident or by Accidental consumption of a substance contaminated by bacteria; 3) traveling or flying on any aircraft engaged in Specialized Aviation Activities; 4) suicide, attempted suicide or intentionally self-inflicted injury; or 5) a declared or undeclared War.

CLAIM NOTICE: Written claim notice must be given to the Company within 20 days after the occurrence of a 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: When the Company receives notice of a claim, the Company will send you forms for giving Proof of Loss to us within 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. Failure to give complete Proof of Loss within these time frames will not invalidate any otherwise valid claim if notice is given as soon as reasonably possible and in no event later than 1 year after the deadline to submit complete Proof of Loss.

TIME PAYMENT OF CLAIMS: The Company will pay you or your beneficiary the applicable Benefit Amount as soon as complete proof of Loss is received if you, the Policyholder and/or the beneficiary have complied with all the terms of this policy. If a claim is contested by us, we will notify you or your beneficiary the reasons for contesting the claim within 45 days of receipt of complete Proof of Loss. If we request additional information from you or your beneficiary, we will not deny the claim until 60 days. All overdue claim payments will bear simple interest at the rate of 10% per year.

EFFECTIVE DATE: Your insurance becomes effective on the latest of the effective date of this policy, the date on which you first meet the eligibility criteria as the Insured Person or the beginning of the period for which required premium is paid for you. Insurance for you automatically terminates on the earliest of: the termination date of this policy, the expiration of the period for which required premium has been paid for you, the date on which you no longer meet the eligibility criteria as the Insured Person or the date on which the Company pays out 100% of the principal sum.

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DEFINITIONS: **Accident or Accidental** means a sudden, unforeseen and unexpected event happening by chance. **Accidental Bodily Injury** means bodily injury which is Accidental, the direct cause of a Loss, is independent of disease, illness or other cause and occurs while you are 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) tendonitis; 7) Carpal Tunnel Syndrome. **Account** means credit card accounts, debit card accounts, central bill accounts, checking accounts and savings accounts as set forth in the policy. **AccountHolder** means any individual who is named on an open and active account with the Policyholder. **Cardholder** means an individual who is named on the account card issued by the policyholder. **Common Carrier** means any motorized land, water or air conveyance 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 is paid by the policyholder. **Covered Trip** means any pre-paid tour, trip or vacation: 1) occurring while the insurance is in-force; 2) which includes at least one overnight stay away from the Insured Person's primary residence; 3) with a destination that is more than fifty (50) miles from the Insured Person's primary residence; and 4) not exceeding sixty (60) days in duration. **Credit Card** means a payment medium that takes the form of a credit card, credit plate, charge plate, courtesy card or other identification card or device issued to you. 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Neither the primary insured person nor domestic partner can be married to, nor in a civil union with, anyone else. **Immediate Family Member** means the insured person's spouse, child, grandchild, grandnephew, grandniece, 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 and 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 under the age of twenty-five (25). **Insured Person** means the Cardholder and their Spouse / Domestic Partner. **Loss of Hand** means the loss of either hand. **Loss of Sight** means the loss of either eye. **Loss of Thumb and Index Finger** means the loss of sight, loss of sight of one eye, Loss of speech, Loss of thumb and index finger. **Loss** must occur within one year after the Accident. **Loss of Foot** means the complete severance of a foot through or above the ankle joint. **Loss of Hand** means a complete severance, as determined by a physician, of at least 4 fingers at or above the metacarpal phalangeal joint on the same hand or at least 3 fingers and the thumb on the same hand. **Loss of Hearing** means permanent, irrecoverable and total deafness, as determined by a physician, with an auditory threshold of more than 20 decibels in both ears. **Loss of Property** means the loss of any property, real or personal, tangible or intangible. **Traveling Companion** means an individual who has been designated by the Policyholder as a traveling companion. **Traveling Companion** means an individual who has made advanced arrangements with you to travel together for all or part of the Covered Trip.

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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. **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 you, an immediate family member, your employer or business partner or the policyholder. **Policyholder** means PSCU Financial Services. **Primary Insured Person** means the Cardholder. **Proof of Loss** means written evidence acceptable to the Company and necessary to establish the Insured Person's entitlement to the Benefit Amount. **Specialized Aviation Activity** means use of a properly certified aircraft for flight on a rocket propelled or rocket launched aircraft. Specialized Aviation Activity shall include any 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. **Spouse** means your husband or wife who is recognized as such by the laws of the jurisdiction in which the primary insured person resides. **We, Us and Our** means Federal Insurance Company.

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DEFINITIONS: **Accident or Accidental** means a sudden, unforeseen and unexpected event happening by chance. **Accidental Bodily Injury** means bodily injury which is Accidental, the direct cause of a Loss, is independent of disease, illness or other cause and occurs while you are 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) tendonitis; 7) Carpal Tunnel Syndrome. **Account** means credit card accounts, debit card accounts, central bill accounts, checking accounts and savings accounts as set forth in the policy. **AccountHolder** means any individual who is named on an open and active account with the Policyholder. **Cardholder** means an individual who is named on the account card issued by the policyholder. **Common Carrier** means any motorized land, water or air conveyance 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 is paid by the policyholder. **Covered Trip** means any pre-paid tour, trip or vacation: 1) occurring while the insurance is in-force; 2) which includes at least one overnight stay away from the Insured Person's primary residence; 3) with a destination that is more than fifty (50) miles from the Insured Person's primary residence; and 4) not exceeding sixty (60) days in duration. **Credit Card** means a payment medium that takes the form of a credit card, credit plate, charge plate, courtesy card or other identification card or device issued to you. You 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 you as an owner of a deposit account maintained by the issuer. You may use the debit card to purchase, hire, rent or lease property or services. Debit Card does not include credit card. **Dependent Child** means the primary insured person's unmarried child, dependent on the primary insured person for maintenance and support, under the age of 25, or classified as an incapacitated dependent child. **Domestic Partner** means a person designated by the primary insured person who is registered as a domestic partner or legal equivalent under the laws of the governing jurisdiction or who is at least 18 years of age and competent to enter into a contract, is not related to the primary insured person by blood; has exclusively lived with the primary insured person for at least 12 consecutive months; is not legally married or separated and has with the primary insured person at least 2 of the following financial arrangements: a joint mortgage or lease, a joint bank account, joint title to or ownership of a motor vehicle or status as a joint lessee on a motor vehicle lease or a joint credit card account with a financial institution. Neither the primary insured person nor domestic partner can be married to, nor in a civil union with, anyone else. **Immediate Family Member** means the insured person's spouse, child, grandchild, grandnephew, grandniece, 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 and 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 under the age of twenty-five (25). **Insured Person** means the Cardholder and their Spouse / Domestic Partner. **Loss of Hand** means the loss of either hand. **Loss of Sight** means the loss of either eye. **Loss of Thumb and Index Finger** means the loss of sight, loss of sight of one eye, Loss of speech, Loss of thumb and index finger. **Loss** must occur within one year after the Accident. **Loss of Foot** means the complete severance of a foot through or above the ankle joint. **Loss of Hand** means a complete severance, as determined by a physician, of at least 4 fingers at or above the metacarpal phalangeal joint on the same hand or at least 3 fingers and the thumb on the same hand. **Loss of Hearing** means permanent, irrecoverable and total deafness, as determined by a physician, with an auditory threshold of more than 20 decibels in both ears. **Loss of Property** means the loss of any property, real or personal, tangible or intangible. **Traveling Companion** means an individual who has been designated by the Policyholder as a traveling companion. **Traveling Companion** means an individual who has made advanced arrangements with you to travel together for all or part of the Covered Trip.

TRIP DELAY: Trip Delay reimburses up to \$100 per day for a maximum of 3 days for the cost of food and temporary lodging until travel by the Insured Person becomes possible. The Insured Person's Trip Delay must occur during a Common Carrier Covered Trip and be due to a Covered Loss, mechanical delay, unannounced strike, civil commotion, hijack or natural disaster. Coverage is limited to one (1) delay per Insured Person during a Common Carrier Covered Trip. **Loss** means: 1) Accidental Bodily Injury or Loss of Life or Sickness of either the Insured Person, Traveling Companion or Immediate Family Member of the Insured Person; 2) medical evacuation of the Insured Person in any weather, which prevents a reasonable and prudent person from traveling or continuing on a Covered Trip. **Trip Delay** means delay of the Insured Person's Covered Trip for at least twelve 12 hours.

THE COST: This coverage is provided at no additional cost to eligible Insureds under the master policy issued to PSCU by Federal Insurance Company (the Company).

AMOUNT OF INSURANCE: The Company's liability will be for a maximum reimbursement of \$3,000 per Insured, of which no more than \$250 will be for all jewelry and fur. Payment will be on an Actual Cash Value basis at the time of loss. Coverage under this plan will be excess over any amount due solely from the Common Carrier.

EXCLUSIONS: Coverage does not apply to loss resulting from: (1) any dishonest, fraudulent or criminal act of the Insured; (2) forgery by the Insured; (3) loss due to war or confiscation by authorities; (4) loss due to nuclear reaction or radioactive contamination. Coverage also does not apply to: (1) sporting equipment, unless checked with the Common Carrier and for which a claim check has been provided by the Common Carrier. (2) animals, perishables; cameras and accessory equipment; eye glasses and contact lenses; prosthetic devices including dentures and hearing aids; tickets, valuable papers and documents; Credit Cards and Debit Cards; securities; money; art objects; electronic equipment; business items; bullion or precious or semi-precious metals, stones or gems other than that contained in items of personal jewelry owned by the Insured; household furniture; motor vehicles, boats or watercraft or aircraft or parts for such conveyances.

EFFECTIVE DATE: This plan is effective the date you first meet the definition of an eligible Insured and will cease on the date the master policy terminates (in which case you will be notified by the Policyholder), 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, whichever occurs first.

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.

Coverage for an Insured will be void if, whether before or after a loss, the Policyholder or its subscribing organization(s) has concealed or misrepresented any material fact or circumstance concerning this coverage or the subject thereof or the interest of the Insured therein, or in case of any fraud or false swearing by the Policyholder or its subscribing organization(s) 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, the Insured must send the following to the Company or its authorized representative: (1) a copy of the 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.

The Insured must: a. protect personal property from further loss, theft or damage; b. report within 24 hours any loss, theft or damage to the appropriate official representative such as the police or Common Carrier service; c. report any loss to the Company or its authorized representatives as soon as reasonably possible; d. submit Proof of Loss to the Company; e. cooperate with the Company in the investigation, settlement or handling of any claims; f. permit the Company to question the Insured under oath whenever the Company's investigation deems it necessary. All statements taken will be signed by the Insured; and g. authorize the Company to obtain records and reports necessary to the Company's investigation.

FOR INSUREDS WHO ARE NEW YORK STATE RESIDENTS: To the extent that this plan provides insurance against the loss or damage to baggage and its contents, the following terms and conditions apply: (1) The loss or damage must occur while the Insured is in transit; (2) The maximum amount of insurance is \$2,000 per bag, including contents, subject to a maximum annual aggregate amount of \$10,000 for all Insureds per trip.

As a handy reference guide, please read this document and keep it in a safe place with your other insurance documents. This Summary of Coverage is not a contract of Insurance but is simply an informative statement to eligible Insureds of the principal provisions of the insurance while in effect. Complete provisions pertaining to this plan are contained in the Master Policy. Insurance coverage is provided by PSCU, hence referred to as the Policyholder. If a statement in this Summary of Coverage and any provision in the policy differ, the policy (if #99068514) will govern.

FOR QUESTIONS REGARDING THIS BENEFIT PLEASE CONTACT THE PLAN ADMINISTRATOR:
Direct Marketing Group
14416 Grover Street
Omaha, NE 68144
1-844-312-2802

For claims related matters ONLY, please contact the Claims Administrator:
Broadspire, a Crawford Company
P.O. Box 459084
Sunrise, FL 33345
Phone: 855-307-9246 | Fax: 855-830-3728
Policy # 9906-85-14

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. For a list of these subsidiaries, please visit our website at www.chubb.com. 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. Chubb, 202 Hall's Mill Road, Whitehouse Station, NJ 08889-1600.

PSCU CC BAGGAGE 0421
Medical Evacuation and Repatriation
ELIGIBILITY: This insurance plan is provided to eligible Cardholders of Connecticut State Employees Credit Union, automatically when the entire cost of the passenger fare(s) is charged to an eligible Card account while the insurance is in force. It is not necessary for you to notify your financial institution, the administrator or the Company when tickets are purchased.

THE COST: This insurance plan is provided at no additional cost to eligible cardholders. Your financial institution pays the full cost of the insurance.

If the Insured Person's Accidental Bodily Injury, disease or illness occurs and requires the Medical Evacuation or Repatriation means the Insured