

This coverage and description supersedes any coverage and description you may have received earlier. Please read and retain for your records.

Your Visa Card Guide to Benefit



# Travel Accident Insurance

Effective 3/1/06

For questions about your balance, call the customer service number on your Visa statement.

Principal Sum: \$500,000

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

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

### Eligibility and Period of Coverage

You and your dependents<sup>1</sup> become covered automatically when the entire Common Carrier fare is charged to your covered Commercial card account ("Covered Persons"). It is not necessary to notify the Financial Institution, the Insurance Company, or the Benefit Administrator when tickets are purchased. Coverage ends when the policy is terminated or on the date your covered card terminates or ceases to be in good standing, whichever occurs first.

### 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.

**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 resulting directly and independently of all other causes from an accident which occurs while the Covered Person is covered under this policy.

**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; (b) charged to your covered 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. Common Carrier does not include a conveyance operated for sport, recreation, and/or sightseeing activities or for any travel in any aircraft device for aerial navigation except as expressly provided in the policy.

**Exclusion:** 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 by a regular schedule for passenger service over an established route; or (d) war or act of war, whether declared or undeclared.

**Beneficiary:** Benefit of 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 policy number VTA00015, should be mailed to the Benefit Administrator within twenty (20) days of a covered Loss or as soon as reasonably possible. The Benefit 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, VTA00015, issued to the Visa U.S.A. Trust, Chicago, IL which is effective 4/1/03. 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 Benefit Administrator: Cardholder Services

550 Mamaroneck Avenue, Suite 309  
Harrison, NY 10528

Underwritten by:

Virginia Surety Company, Inc.  
1000 N. Milwaukee Avenue  
Glenview, IL 60025

<sup>1</sup>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. The maximum benefit payable for dependent children is the Principal Sum, not to exceed \$500,000.

(Continued on next page)

## Travel Accident Insurance (Cont.)

**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 "the Company"). We reserve the right to change the benefits and features of all these programs.

The terms and conditions contained in this Guide to Benefit may be modified by subsequent endorsements. Modifications to the terms and conditions may be provided via additional Guide to Benefit mailings, statement inserts, or statement messages. The program described in this Guide to Benefit will not apply to Visa cardholders whose accounts have been suspended or canceled.

Visa, the Company, and/or your financial institution can cancel or non-renew the benefit, and if we do, we will notify you at least thirty (30) days in advance. Such notices need not be given if substantially similar replacement benefit 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 card privileges have been suspended or canceled. However, insurance benefits will still apply to Covered Trips commenced prior to the date that your account is suspended or canceled provided all other terms and conditions of coverage are met.

Coverage will be void if, at any time, the eligible Visa cardholder has concealed or misrepresented any material fact or circumstance concerning the benefit or the subject thereof of the eligible Visa cardholder'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 eligible Visa cardholder 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 benefit 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.

FORM #VTAI (03/06)



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