VARIABLE RATE VISA®
CREDIT CARD AGREEMENT

San Diego County Credit Union®

In this Agreement, the words “you” and “your” mean each and all of those who agree to be bound by this Agreement; “Card” means the Visa Credit Card and any duplicates, renewals, or substitutions San Diego County Credit Union issues to you; “Account” means your Visa Credit Card line of credit Account with SDCCU®; “We,” “our,” “ours,” “us” and “Credit Union” means San Diego County Credit Union.

1. **Using Your Account:** If you are approved for an Account, SDCCU will establish a line of credit for you and notify you of your credit limit. You agree that your credit limit is the maximum amount (purchases, cash advances, finance charges, plus "other charges") that you will have outstanding on your Account at any time. If you are over your credit limit, you must pay the amount you are over before your credit limit will be accessible. You may request an increase in your credit limit only by a method acceptable to SDCCU. The Credit Union has the right to reduce your credit limit, refuse to make an advance and/or terminate your Account at any time for any reason not prohibited by law.

2. **Using Your Card:** You understand that the use of your Card will constitute acknowledgement of receipt and agreement to the terms of the Agreement. You may use your Card to make purchases from merchants and others who accept Visa Cards. We reserve the right to decline Internet or Telephone Gambling Transactions. If you wish to pay for goods or services over the Internet, you may be required to provide Card number security information before you will be permitted to complete the transaction. In addition, you may obtain cash advances from SDCCU and from other financial institutions that accept Visa Cards, and from some Automated Teller Machines (ATMs) (not all ATMs accept Visa Cards). This Agreement governs the use of your SDCCU Visa ATM Card. By use of your Visa ATM Card with your Personal Identification Number (PIN) in an ATM machine, you authorize us to make payments and withdrawals from your Visa credit line with us in accordance with instructions given to the machine. Loan payments can only be made at participating CO-OP Network machines. Deposits and Loan payments made at an ATM machine are subject to verification by us and may not be credited or withdrawn for up to 72-hours after deposit, longer on weekends and holidays. We cannot be held responsible for delays in credit posting due to improper identification. Proper identification includes your full, legal name, San Diego County Credit Union’s name, your SDCCU Account number, and to which Account you want the credit to be posted. If you are making a Visa payment, include a Visa payment coupon in the envelope. When the ATMs are online with our computer, you can withdraw cash up to a maximum of $500.00, depending on your Account with us, or the available credit in your Accounts, whichever is less, every day. When the ATMs are offline, cash withdrawals are limited.

   Please refer to the Electronic Fund Transfers section of our Account disclosure for more information.

   To obtain cash advances from an ATM, you must use the PIN that is issued to you for use with your Card. You agree that you will not use your Card for any transaction that is illegal under applicable federal, state or local law. We do not guarantee approval of transactions and are not liable for transactions that are not approved, either by us or by a third party, even if you have sufficient credit available. We may limit the number of transactions that may be approved in one day. If we detect unusual or suspicious activity, we may suspend your credit privileges until we can verify the activity.

3. **Responsibility:** You agree to pay all charges (purchases and cash advances) to your Account that are made by you or anyone whom you authorize to use your Account. You also agree to pay all finance charges and other charges added to your Account under the terms of this Agreement or another agreement you made with SDCCU. If this is a Joint Account, Section 18 below also applies to your Account.

4. **Finance Charges:** New purchases posted to your Account during a billing cycle will not incur a finance charge for that billing cycle if you had a zero or credit balance at the beginning of that billing cycle or you paid the entire New Balance on the previous cycle's billing statement by the Payment Due Date of that statement; otherwise a finance charge will accrue from the date a purchase is posted to your Account. To avoid an additional finance charge on the balance of purchases, you must pay the entire New Balance on the billing statement by the Payment Due Date of that statement. A finance charge begins to accrue on cash advances from the date you take the cash advance and continues until the entire cash advance balance is paid.

The finance charge is calculated separately for purchases and cash advances. For purchases, the finance charge is computed by applying the Daily Periodic Rate to the average daily balance of purchases. The Daily Periodic Rate is equal to the Annual Percentage Rate (APR) in effect at any time divided by 365. To get the average daily balance of purchases, we take the beginning outstanding balance of purchases each day, add any new purchases, and subtract any payments and/or credits. This gives us the daily balance of purchases. Then, we add all the daily balances of purchases for the billing cycle together and divide the total by the number of days in the billing cycle. This gives us the average daily balance of purchases.

For cash advances, the finance charge is computed by applying the Daily Periodic Rate to the average daily balance of cash advances. To get the average daily balance of cash advances, we take the beginning outstanding balance of cash advances each day, add in any new cash advances, and subtract any payments and/or credits that we apply to the cash advance balance. This gives us the daily balance of cash advances. Then, we add all the daily balances of cash advances for the billing cycle together and divide the total by the number of days in the billing cycle. This gives us the average daily balance of cash advances.

The APR is subject to change on the statement cycle date to reflect any change in the Index and will be determined by the Prime Rate on the 15th or next business day of March, June, September and December of each year as published in The Wall Street Journal plus 5.40% for Visa Classic and 3.90% for Visa Platinum. The APR will never be less than 9.99% nor greater than 19.99%. If the Index is no longer available, SDCCU will choose a new index, which is based upon comparable information.

The Daily Periodic Rate that will apply to your Visa Classic Card is <CLASSICDAILY>% with an APR of <CLASSICAPR>%.

The Daily Periodic Rate that will apply to your Visa Platinum Card is <PLATDAILY>% with an APR of <PLATAPR>%.

If a payment is missed more than one billing cycle two times in a 12-month period, the APR will be 19.99% fixed on all future balances, including promotional rates.

5. **Other Charges:** The following other charges (fees) will be added to your Account, as applicable:

a. **Credit Limit Overage Fee:** You may be charged a fee of $10.00 per month for any day the balance of your Account exceeds the credit limit by $500.00 or 20% of your approved limit, whichever is less. You will be charged the fee each subsequent month until your New Balance on the statement date, less any fees imposed during the cycle, is BELOW your credit limit. We add this fee even if we approved transactions that contribute to the New Balance exceeding your credit limit.

b. **Late Payment Fee:** If you are ten (10) or more days late in making your minimum payment, a late charge of $10.00 will be added to your Account.

c. **Returned Convenience Check Fee:** We add a $27.00 fee in addition to the standard advance balance if we decline to honor a convenience check. We may decline to honor these checks if, for example, the amount of the check would cause the balance to exceed the credit line, if you are delinquent, if you are in default, or if you did not comply with our instructions regarding the check.

d. **Card Replacement Fee:** You will be charged $5.00 for each replacement Card that you request.

e. **Cash Advance Fee/Balance Transfer Fee:** You will be charged 2% of the amount of the cash advance, minimum $1.00 and maximum $50.00.

f. **Collection Costs:** You agree to pay all costs of collecting the amount you owe under this Agreement, including court costs and reasonable attorney's fees.

g. **Convenience Check Stop Payment Fee:** You will be charged a $20.00 fee in addition to the standard advance balance if we honor your request to stop payment on a convenience check. To stop payment on a convenience check, write to us at: 6545 Sequence Drive, San Diego, CA 92121, or call Information Services at (877) 732-2848. If you call, you must confirm the call in writing within 14 days. A written stop payment order remains in effect for a maximum of six (6) months unless renewed in writing.

6. **Payments:** Each month you must pay at least the minimum payment amount shown on your statement by the payment due date. The payment must be received on the 27th of each month by the end of the day (5:00 p.m. Pacific Standard Time (PST)). You may pay more frequently, pay more than the minimum payment or pay the

Total New Balance in full. If you make extra or larger payments, you are still required to make at least the minimum payment each month your Account has a balance (other than a credit balance). The minimum payment is 3% of your Total New Balance, or $20.00, whichever is greater, plus the amount of any prior minimum payments that you have not made, and any amount you are over your credit limit. SDCCU also has the right to demand immediate payment of any amount by which you are over your credit limit. You must notify us immediately of any change in your billing address and/or your email address if you are enrolled in eStatements. We may accept late payments, partial payments or any payments marked as being payment in full or as being settlement of any dispute without losing any of our rights under the Agreement or under the law. If we accept such payments, this does not mean we agree to change this Agreement in any way. Payments that exceed your credit limit may be returned at SDCCU's discretion.

7. **Payment Allocation:** Subject to applicable law, your payments may be applied to what you owe SDCCU in any manner SDCCU chooses.

8. **Security Interest:** You understand that the use of your Card will constitute acknowledgement of receipt and agreement to the terms of the Agreement. If you give SDCCU a specific pledge of shares by signing a separate pledge of shares, your pledged shares will secure your Account. You may not withdraw amounts that have been specifically pledged to secure your Account until SDCCU agrees to release all or part of the pledged amount. In addition, your Account is secured by all other shares you have in any Individual or Joint Account with SDCCU, except for shares in an Individual Retirement Account or in any other Account that would lose special tax treatment under state or federal law if given as security. You authorize SDCCU to apply the balance in your Individual or Joint Share Accounts to pay any amounts due on your Account if you should default. Collateral securing other Loans you have with SDCCU may also secure this Loan, except that a dwelling will never be considered as security for this Account, notwithstanding anything to the contrary in any other Agreement.

9. **Default:** You will be in default if you fail to make any minimum payment or other required payment by the date that it is due, if you attempt to borrow more than the applicable limits on your Account or if you break any promise you make under this Agreement. Additionally, we may consider your Account in default if at any time you declare bankruptcy or become insolvent, that is, unable to pay your obligations when they become due, fail to give immediate notice of loss, theft, or unauthorized use of any Card or check issued hereunder, use of collateral for unlawful purposes, or in the event of your death. You will be in default it you make any false or misleading statements in any credit application or credit update. You will also be in default if something happens that SDCCU believes may substantially reduce your ability to repay what you owe.

10. **Liability For Unauthorized Use-Lost/Stolen Card Notification:** You agree to notify us immediately, verbally or in writing at 6545 Sequence Drive, San Diego, CA 92121 or telephone (877) 732-2848 twenty-four (24) hours a day, seven (7) days a week, of the loss, theft, or unauthorized use of your Card. You may be liable for the unauthorized use of your Card. You will not be liable for unauthorized use that occurs after you notify us of the loss, theft, or possible unauthorized use. You will have no liability for unauthorized purchases made with your Card, unless you are negligent in the handling of your Card. In any case, your liability will not exceed $50.00. We may require you to provide certain information in writing to help us find out what happened and to comply with our investigation and may require documents to be notarized.

11. **Changing Or Terminating Your Account:** SDCCU may change the terms/rates of this Agreement from time to time. Notice of any change will be given in accordance with applicable law. If permitted by law and specified in the notice to you, the change will apply to your existing Account balance as well as to future transactions.

    Either you or SDCCU may terminate this Agreement at any time, but termination by you or SDCCU will not affect your obligation to pay the Account balance plus any finance and other charges you owe under this Agreement. You are also responsible for all transactions made to your Account after termination, unless the transactions were unauthorized.

    The Card(s) you receive remain the property of SDCCU and you must recover and surrender to SDCCU all Cards upon request or upon termination of this Agreement whether by you or SDCCU. SDCCU has the right to require you to pay your full Account balance at any time after your Account is terminated, whether it is terminated by you or SDCCU. If this is a Joint Account, Section 18 of this Agreement also applies to termination of the Account.

12. **Credit Review And Release Of Information:** You authorize SDCCU to investigate your credit standing when opening or reviewing your Account. You authorize SDCCU to disclose information regarding your Account to credit bureaus and creditors who inquire about your credit standing. If your Account is eligible for emergency cash and/or emergency Card replacement services, and you request such services, you agree that we may provide personal information about you and your Account that is necessary to provide you with the requested service(s).

13. **Returns And Adjustments:** Merchants and others who honor your Card may give credit for returns or adjustments, and they will do so by sending SDCCU a credit which will be posted to your Account. If your credits and payments exceed what you owe SDCCU, the amount will be applied against future purchases and cash advances. If the credit balance amount is $1.00 or more, it will be refunded upon your request. You may not maintain a credit balance in excess of your credit line. Payments that exceed your credit limit may be returned at SDCCU's discretion.

14. **Credits Without Offsetting Debit:** All credits to your Account must be offset by a corresponding debit. SDCCU reserves the right to return a credit that does not have a corresponding debit and/or terminate your Account credit limit and expire your Card.

15. **Illegal Transactions:** Illegal Visa Transactions are prohibited on your SDCCU Visa Credit Card. You cannot make or permit anyone to process a transaction on your SDCCU Visa that is illegal under state or federal law. Your SDCCU Visa will be in default if an illegal transaction is made on your Account.

16. **Additional Benefits/Card Enhancements:** SDCCU may from time to time offer additional services to your Account, such as travel accident insurance, at no additional cost to you. You understand that SDCCU is not obligated to offer such services and may withdraw or change them at any time.

17. **Foreign Transactions:** Purchases and cash advances made in foreign currencies will be debited from your Account in U.S. dollars. The exchange rate between the transaction currency and the billing currency used for processing international transactions is a rate selected by Visa from a range of rates available in wholesale currency markets for the applicable central processing date, which rate may vary from the rate Visa itself receives, or the government-mandated rate in effect for the applicable central processing date, in each instance plus an additional 1%. The exchange rate used on the processing date may differ from the rate that would have been used on the purchase date or Cardholder statement posting date.

18. **Joint Accounts:** Each cardholder will be individually and jointly responsible for paying all amounts owed under this Agreement. This means that SDCCU can require any one of you individually to repay the entire amount owed under this Agreement. Each of you authorizes the other(s) to make purchases or cash advances individually. Any one of you may terminate the Account and the termination will be effective to all of you.

19. **Effect of Agreement:** This Agreement is the contract which applies to all transactions on your Account even though the sales, cash advances, credit or other slips you sign or receive may contain different terms.

20. **No Waiver:** SDCCU can delay enforcing any of its rights any number of times without losing them.

21. **Statements and Notices:** Statements and notices will be mailed to you at the most recent address you have given SDCCU. Notice sent to any one cardholder will be considered notice to all.

22. **Final Expression:** This Agreement is the final expression of the terms and conditions of this Visa line of credit between you and SDCCU. This written Agreement may not be contradicted by evidence of any alleged oral agreement.

23. **Copy Received:** You acknowledge that you have received a copy of this Agreement.

YOUR BILLING RIGHTS
KEEP THIS NOTICE FOR FUTURE USE

This notice contains important information about your rights and our responsibilities under the Fair Credit Billing Act and the Fair Credit Reporting Act.

Notify Us In Case Of Errors Or Questions About Your Bill

If you think your bill is wrong, or if you need more information about a transaction on your bill, write to us on a separate sheet of paper at the address listed on your bill. Write to us as soon as possible, as we must hear from you no later than sixty (60) days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your full, legal name and SDCCU Account number.
- The dollar amount of the suspected error.
- Describe the error and explain, to the best of your ability, why you think there is an error. If you need more information, describe the item you are not sure about.
- Please sign and date your letter.

If you have authorized us to pay your Credit Card bill automatically from your Savings or Checking Account, you can stop the payment on any amount you think is wrong. To stop the payment your letter must reach us three (3) business days before the automatic payment is scheduled to occur.

Your Rights And Our Responsibilities After We Receive Your Written Notice

We must acknowledge your letter within thirty (30) days, unless we have corrected the error by then. Within ninety (90) days, we must either correct the error or explain why we believe the bill was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including finance charges, and we can apply an unpaid amount against your credit limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your bill that are not in question.

If we find that we made a mistake on your bill, you will not have to pay any finance charges related to any questioned amount. If we didn't make a mistake, you may have to pay finance charges, and you will have to make up any missed payments on the questioned amount. In either case, we will send you a statement of the amount you owe and the date that it is due.

If you fail to pay the amount that we think you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within ten (10) days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your bill.

If we don't follow these rules, we cannot collect the first $50.00 of the questioned amount, even if your bill was correct.

Notice Of Negative Information: Federal law requires us to provide the following notice to members before any “negative information” may be furnished to a nationwide consumer reporting agency. We may report information about your Account to credit bureaus. Late payments, missed payments, or other defaults on your Account may be reflected in your credit report.

Special Rules For California Residents

If you are a California resident, our right to recover any credit extended through the use of your Card in making purchases from a retailer is subject to good faith defenses which you have properly asserted as a buyer under California law against the retailer from whom the Cardholder made the purchases if: (a) the purchase price of the item as to which a defense is asserted exceeds $50.00; (b) the purchase was made within the State of California; (c) you have made a written demand upon the retailer with respect to the purchase and attempted in good faith to obtain reasonable satisfaction from the retailer; and (d) you give us written notice specifying the retailer, the date of purchase, the purchase price, the goods or services purchased, the nature of your defense with respect to the transaction, as well as the action which you have taken in attempting to obtain satisfaction from the retailer.

Rates effective ~CurrentDateLong~ and subject to change

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VISA® CARD GUIDE BENEFIT

AUTO RENTAL COLLISION DAMAGE WAIVER

San Diego County Credit Union®

Effective March 1, 2006. This benefit and description supersedes any benefit and description you may have previously received.
For questions about your balance, call the cardholder service number on your Visa statement. Please read and retain for your records.

What is this benefit?
When certain terms and conditions are met, the Visa Auto Rental Collision Damage Waiver benefit ("Auto Rental CDW") provides, at no additional charge, reimbursement for damage due to collision or theft up to the actual cash value of most rental vehicles. In your country of residence, this benefit is supplemental to, and excess of, any valid and collectible insurance from any other source. Here are answers to some commonly asked questions about the benefit:

Who is eligible?
You are eligible only if you are a valid cardholder whose name is embossed on an eligible U.S.-issued Visa card. Only you as the primary renter of the vehicle and any additional drivers permitted by the auto rental agreement are covered.

What is covered?
Subject to the terms and conditions in this Guide to Benefit, Visa Auto Rental CDW reimburses you for covered damage or theft to a rental vehicle while it is your responsibility as well as valid administrative and loss-of-use charges imposed by the auto rental company and reasonable towing charges. Only vehicle rental periods that neither exceed nor are intended to exceed fifteen (15) consecutive days within your country of residence or thirty-one (31) consecutive days outside your country of residence are covered.

The benefit provides reimbursement up to the actual cash value of the vehicle as it was originally manufactured. Most private passenger automobiles, minivans and sport utility vehicles are eligible, but some restrictions may apply. Please contact the Benefit Administrator to inquire about a specific vehicle.

Within your country of residence, this benefit supplements, and applies excess of, any valid and collectible insurance or reimbursement from any source. This means that, subject to the terms and conditions of this Guide to Benefit, Visa Auto Rental CDW applies to losses or expenses that are not covered by insurance or reimbursement.

Covered losses are:

- Physical damage and/or theft of the covered rental vehicle.
- Valid loss-of-use charges imposed and substantiated by the auto rental company through a fleet utilization log.
- Reasonable and customary towing charges, due to a covered loss, to the nearest qualified repair facility.

How do I activate this benefit?
For the benefit to be in effect, you must:

- Initiate and complete the entire rental transaction with your eligible Visa card, and
- Decline the auto rental company's collision damage waiver (CDW/LDW) option, or similar provision, if offered by the auto rental company.

Helpful hints:

- Check the rental vehicle for prior damage before leaving the rental lot.
- Review the auto rental agreement carefully to make sure you are declining CDW/LDW and also to familiarize yourself with the terms and conditions of the auto rental agreement.

What do I do if I have an accident or the rental vehicle is stolen?
Immediately call the Benefit Administrator at **1-800-VISA-911** to report the theft or damage regardless of whether your liability has been established. If you are outside the United States, call collect at 0-410-581-9994. The Benefit Administrator will answer any questions you or the rental agency may have and will then send you a claim form.

All incidents must be reported immediately following the theft or damage, but in no event later than forty-five (45) days* following the date of the theft or damage. Furthermore, we reserve the right to deny any claim that contains charges that would not have been included had the Benefit Administrator been notified before those expenses were incurred. We therefore advise you to notify us immediately after any loss. You must make every reasonable effort to protect the rental vehicle from damage or theft.

What is not covered?

- Any obligation you assume under any agreement (other than the deductible under 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 rental agency or its insurer.
- Cost of any insurance or collision damage waiver offered by or purchased through the auto rental company.
- Depreciation of the rental vehicle caused by loss or damage including, but not limited to, "diminished value."
- Expenses reimbursable by your insurer, employer, or employer's insurance.
- Loss 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.

* Not applicable to residents of certain states.

- Items not installed by the original manufacturer.
- Loss due to off-road operation of the rental vehicle.
- Loss due to hostility of any kind (including, but not limited to, war, invasion, rebellion, or insurrection).
- 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) consecutive days outside your country of residence.
- Leases and mini leases.
- Loss or damage as a result of the cardholder's lack of reasonable care in protecting the rental vehicle before and after damage occurs (for example, leaving the vehicle running and unattended).
- Losses reported more than forty-five (45) days* from the date of loss.
- Losses for which a claim form has not been received within ninety (90) days* from the date of loss.
- Losses for which all required documentation has not been received within 365 days from the date of loss.
- Losses from rental transactions which originated in Israel, Jamaica, the Republic of Ireland, or Northern Ireland.

What if the auto rental company insists that I purchase the auto rental company's auto insurance or collision damage waiver?
Call the Benefit Administrator at **1-800-VISA-911** for help. If you are outside the United States, call collect at 0-410-581-9994.

When and where do I have this benefit?
This benefit is available on a 24-hour basis, in the United States and most foreign countries. No benefit is provided for motor vehicles rented in Israel, Jamaica, the Republic of Ireland, or Northern Ireland. Additionally, this benefit is not available where precluded by law or in violation of the territory terms of the auto rental agreement or prohibited by individual merchants. **Because regulations vary outside the United States, we recommend you check with your auto rental company and the Benefit Administrator before you travel to make sure Visa Auto Rental CDW will apply.**

This benefit is in effect while the rental vehicle remains in your control or in the control of a person permitted to operate the rental vehicle in accordance with the rental agreement between you and the auto rental company. This benefit terminates when the auto rental company re-assumes control of the rental vehicle.

How does this benefit apply?
Within your country of residence, Visa Auto Rental CDW supplements, and applies excess of, any valid and collectible insurance or reimbursement from any source. It does not duplicate insurance provided by or purchased through the auto rental company; it will not pay for losses reimbursed by your own insurer, employer, employer's insurance, or any other valid and collectible insurance; however, it will pay for the outstanding deductible portion or other charges, including valid administration and loss-of-use charges not covered by your applicable automobile insurance policy. Outside your country of residence or if you do not have automobile insurance, this benefit is primary in those countries where it is available, and in that case, you do not have to claim payment from any other source of insurance before receiving the benefits.

What types of rental vehicles are not covered?
Excluded worldwide are: expensive, exotic, and antique automobiles; certain vans; vehicles that have an open cargo bed; trucks; motorcycles, mopeds, and motorbikes; limousines; and recreational vehicles.
Examples of excluded expensive or exotic automobiles are the Aston Martin, Bentley, Bricklin, Daimler, DeLorean, Excalibur, Ferrari, Jensen, Lamborghini, Lotus, Maserati, Porsche, and Rolls Royce. However, selected models of BMW, Mercedes-Benz, Cadillac, and Lincoln are covered.
An antique automobile is defined as any vehicle over twenty (20) years old or any vehicle that has not been manufactured for ten (10) years or more.
This benefit is provided for only those vans manufactured and designed to transport a maximum of eight (8) people and which is used exclusively to transport people.
If you have any questions regarding a specific vehicle, call the Benefit Administrator at **1-800-VISA-911**. If you are outside the United States, call collect at 0-410-581-9994.

What do I need from the auto rental company in order to file a Visa Auto Rental CDW claim?
At the time of the damage or theft, or when you return the rental vehicle, immediately ask the auto rental company for:

- A copy of the Accident Report Form and claim document, which should indicate the costs you are responsible for and any amounts that have been paid toward the claim.
- A copy of the initial and final auto rental agreement(s).
- A copy of the repair estimate or itemized repair bill.
- Two (2) photographs of the damaged vehicle, if available.
- A police report, if obtainable.

How do I file a claim?
You, the cardholder, are responsible for reporting your claim to the Benefit Administrator immediately, but in no event later than forty-five (45) days* from the date of theft or damage, or your claim will be denied. Notice to any other party will not suffice. Furthermore, we reserve the right to deny any claim that contains charges that would not have been included had the Benefit Administrator been notified before those expenses were incurred. We therefore advise you to notify us immediately after any theft or damage.
Mail the following documentation to the Benefit Administrator:

- The completed and signed Visa Auto Rental CDW Claim Form. **Your completed claim form must be postmarked within ninety (90) days* of the date of the damage or theft, even if all other required documentation is not yet available, or your claim will be denied**.
- A copy of your receipt or monthly billing statement as proof that the entire vehicle rental was charged and paid for with your eligible Visa card.
- 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, please provide a notarized statement to that effect.

* Not applicable to residents of certain states.

- A copy of the declaration page from your automobile insurance carrier.
- Enclose all the documents you received from the auto rental company:
  - A copy of the Accident Report Form.
  - A copy of the entire auto rental agreement(s).
  - A copy of the repair estimate or itemized repair bill.
  - Two (2) photographs of the damaged vehicle, if available.
  - A police report, if obtainable.
  - Any other documentation deemed necessary by the Benefit Administrator to substantiate the claim.

For faster filing, submit your claim online. It's easy, convenient, and available at no extra cost to eligible Visa cardholders. To submit your claim and learn more about Visa Auto Rental CDW go to the Visa Auto Rental CDW Claim Center at www.visa.com/eclaims.

If you experience difficulty in obtaining all the required documents within ninety (90) days* of the date of theft or damage, just submit the claim form and any documentation you already have available. NOTE: *All remaining documents must be postmarked within 365 days of the date of theft or damage.*

Do I have to do anything else?
Usually not. Under normal circumstances, the claim will be paid within fifteen (15) days after the Visa Auto Rental CDW Benefit Administrator has received all documentation necessary to fully substantiate your claim.

However, after the Benefit Administrator has paid your claim, all your rights and remedies against any party in respect of this theft or damage will be transferred to the Provider to the extent of the cost of the Provider's payment to you.

The Provider shall then be entitled at its own expense to sue in your name. Should this occur, you must give the Provider all assistance as the Provider may reasonably require to secure its rights and remedies including the execution of all documents necessary to enable the Provider to bring suit in your name.

Additional Provisions for Auto Rental CDW: You must make every effort that would be made by a reasonable and prudent person to protect the Rental Vehicle from damage or theft. This provision will not be applied unreasonably to avoid claims.
If you make any claim knowing it to be false or fraudulent in any respect including, but not limited to, the cost of repair services, no coverage shall exist for such claim and your benefits may be canceled. The Provider relies on the truth of the statements of each cardholder. Each cardholder agrees that such representations are accurate and complete. Any and all relevant provisions shall be void in any case of fraud, intentional concealment, or misrepresentation of material fact by the cardholder.

Once you report an occurrence, a claim file will be opened and shall remain open for six (6) months from the date of the damage or theft. No payment will be made on a claim that is not completely substantiated in the manner required by the Benefit Administrator within twelve (12) months of the date of damage or theft.

No legal action for a claim may be brought against us until sixty (60) days after we receive Proof of Loss. After the expiration of two (2) years from the time written Proof of Loss was to be provided, no action shall be brought to recover on this benefit.

Further, no legal action may be brought against us unless all the terms of this Guide to Benefit and policy have been complied with fully.

Visa Auto Rental CDW is a benefit provided to eligible Visa cardholders in accordance with the policy underwritten by Indemnity Insurance Company of North America ("Provider"). The benefit is subject to the terms and conditions outlined and includes certain restrictions, limitations, and exclusions. This Guide to Benefit is not a policy of insurance. In the event of any conflict between the description of the benefit in this Guide to Benefit and the policy, the policy will govern. The policy is on file at the offices of Visa U.S.A.

The benefit described in this Guide to Benefit will not apply to Visa cardholders whose accounts have been suspended or canceled.

This benefit is provided to eligible Visa cardholders at no additional cost. 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.

Termination date may vary by financial institutions. Visa 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. If the Provider non-renews or cancels any benefit provided to eligible Visa cardholders, you will be notified within 30–120 days before the expiration of the policy. In the event a substantially similar benefit takes effect without interruption, no such notice is necessary. Visa Auto Rental CDW will still apply to vehicle rentals commenced prior to the date of such cancellation or non-renewal provided all other terms and conditions of the benefit are met.

For general questions regarding this benefit, call the Benefit Administrator at **1-800-VISA-911**. If you are outside the United States, call collect at 0-410-581-9994.

FORM #VCCDW01 (03/06)

* Not applicable to residents of certain states.

VISA® CARD GUIDE BENEFIT
TRAVEL ACCIDENT INSURANCE

San Diego County Credit Union®

Effective March 1, 2006. This benefit and description supersedes any benefit and description you may have previously received.
For questions about your balance, call the cardholder service number on your Visa statement. Please read and retain for your records.

Principal Sum: $<INSERT 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[1] become covered automatically when the entire Common Carrier fare is charged to your covered <INSERT CARD TYPE (Platinum, Gold, Classic)> 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%	One hand or one foot and the sight of one eye	100%
Both hands or both feet	100%	One hand or one foot	50%
Sight of both eyes	100%	Sight of one eye	50%
One hand and one foot	100%	Speech or hearing	50%
Speech and hearing	100%	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 April 1, 2003. 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.

[1]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>.

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

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 of 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)