

# Now your future is more secure

## Thanks to Credit Protection Plus

Bank of America



\*\*0002  
Jane Doe  
111 Any Ave  
Apt 1  
Anywhere, MO 68000-0000

Dear Jane Doe,

Congratulations and thank you for enrolling in Credit Protection Plus. You have made a wise decision. Credit Protection Plus is designed to be there when you need it the most.

Your enrollment in Credit Protection Plus delivers the following:

- Peace of Mind
- World Class Benefits
- Two Free Personalized Credit Reports with Credit Score per year
- Identity Theft Recovery Assistance

Please review the Certificate of Enrollment below and retain this document with your important papers. If you have any questions regarding the Plan, or to activate a benefit, please call us at 1.888.668.6938 Monday-Friday, between 7:00 a.m. - 10:00 p.m. Central Time. We value your business and look forward to serving you.

Sincerely,

Harry G. Lomax  
Senior Vice President

- Involuntary Unemployment
- Hospitalization & Disability
- Family Leave of Absence
- Loss of Life
- Marriage
- Divorce
- Child Birth or Adoption
- Moving
- College
- Retirement
- Credit Bureau
- Identity Theft

“I lost my job all of a sudden. Having Credit Protection Plus take care of my credit card payment while I find a new job is a big relief.”

P. Bass (Mississippi)

### Credit Protection Plus Certificate of Enrollment

**Last 4 Digits of the Protected Account:**

\_\_\_\_\_

**Protected Cardholder:**

\_\_\_\_\_

**Program Fee per \$100 of Monthly Balance:**

\_\_\_\_\_

**To Activate Benefits: Call 1-866-688-6938 M-F  
7 a.m. - 10 p.m. Central Time.**

**Protection Effective Date:**

\_\_\_\_\_

**Maximum Benefit Amount:**

\_\_\_\_\_

**Maximum Benefit Period:**

\_\_\_\_\_

Co-Applicant and Authorized users are also eligible for benefits (must be listed on the enrolled account at the time of benefit activation).

## **Credit Protection Plus**

### **Frequently Asked Questions**

For questions and/or requests for benefit activation, please contact the Plan Administrator toll-free at 1.888.668.6938 Monday-Friday, 7:00 a.m. - 10:00 p.m. Central Time.

**Q: What if I decide I don't want Credit Protection Plus?**

A: The Plan includes a 30-day review period. If You decide You do not want to keep the protection, You have 30 days from the Effective Date on Your Certificate of Enrollment to cancel Your protection and request a full refund to Your credit card account of any billed Monthly Program Fees by contacting the Plan Administrator toll-free at 1.888.668.6938 Monday-Friday, 7:00 a.m. - 10:00 p.m. Central Time.

**Q: When does my protection begin?**

A: Your protection begins on the Effective date shown on the Certificate of Enrollment. Please read the enclosed Addendum to the Credit Card Agreement for complete information about Your protection and keep it in a safe place with Your other important papers for future reference.

**Q: What is the cost of Credit Protection Plus?**

A: The Monthly Program Fee for Credit Protection Plus is stated on Your Certificate of Enrollment. If the Monthly Program Fee changes, You will be given at least thirty (30) days written notice.

**Q: How do I activate a benefit under Credit Protection Plus?**

A: To request a benefit activation, contact the Plan Administrator at 1.888.668.6938 Monday-Friday, 7:00 a.m. - 10:00 p.m. Central Time. The Plan Administrator will request that you provide the necessary information to make a benefit decision. Once the necessary information is submitted, the Plan Administrator will notify You of Your eligibility for benefits and anticipated payment dates (if applicable).

**Q: What information do I need to provide the Plan Administrator when I call to activate a benefit?**

A: When calling to activate a benefit, please be prepared to provide the Plan Administrator with the following information:

1. Personal information including Your name, address, telephone number;
2. Your protected credit card account number;
3. The nature of Your loss and a brief description of how the loss occurred;
4. The date on which the loss occurred; and
5. Specific information related to the Protected Event, such as the name of Your physician, the amount of Your unemployment benefits, Your unemployment registration number, or the name of the hospital where you were treated.

**Q: Once I am in a benefit activation status, how long can it continue?**

A: The Plan Administrator will determine the benefit period in accordance with the terms of the Addendum. Your maximum benefit period is stated on Your Certificate of Enrollment. Each month You may be required to provide the Plan Administrator with updated completed proof of loss form(s) to continue Your benefit activation, and You will be required to meet the qualifications outlined in the enclosed Addendum.

**Q: Can I still use my Bank of America credit card during a benefit activation?**

A: Yes. You can continue to use your Bank of America credit card, as long as You continue to comply with the terms of Your Credit Card Agreement, during a benefit activation. During a benefit period, We will cancel Your Total Minimum Monthly Payment. While the Plan Administrator is reviewing Your request for benefit activation and until the request for benefit activation is approved, You must continue to pay at least the Total Minimum Payment Due on Your Protected Account. You will be notified when Your benefit is activated. Benefit activation will be retroactive to Your Date of Loss.

# Make sure others get to see the real you.

These added bonuses are available to you at no extra cost—upon your request.



## Identity Theft Recovery Unit

One of America's fastest-growing crimes is Identity Theft. While no one plans on being a victim, it is good to know that if you are targeted, you have an Identity Theft Recovery Unit by your side.

As a bonus to your enrollment in this Plan, we will assist you with Identity Theft Recovery if you become a victim. A dedicated agent of the Identity Theft Recovery Unit will help guide you through the steps involved in reporting the incident that results from identity theft and disputing inaccurate information in your credit file.\* This Agent will do the following:

- Assist you in contacting credit reporting agencies, creditors, law enforcement, and regulatory offices
- Monitor your Equifax, Experian, and TransUnion credit files every business day for significant changes that could indicate fraud

You will also receive a Fraud First Aid Kit. This Kit provides the tools needed to help you through the recovery process.



## Enhanced Credit Report

Your Credit Report\* contains important information about your current financial picture and past payment history. Information contained in Credit Reports is used to obtain loans and preferred rates for such things as:

- Automobiles
- Home improvement
- Rentals
- Personal loans
- Mortgages
- Tuition

In some circumstances, employers use Credit Reports to determine an applicant's qualifications.

The use of Credit Reports is growing and the need for them to have accurate and up-to-date information is critical.

Enrollment in this Plan enables you to request your Credit Report twice every year at no extra cost. By reviewing your Credit Report, personalized with your Credit Score, you will have the opportunity to ensure that it is accurate and up-to-date. Unlike reports you may receive directly from a consumer reporting agency, this Bonus Credit Report is consumer-friendly—easy to read and understand.

\* Bank of America has contracted with Intersections Inc. (Intersections) to provide these services. Intersections Inc. is not affiliated with Bank of America.

Complete, detach, and return the Request Form below in the enclosed envelope. Mail To: Intersections, P.O. Box 220510, Chantilly, VA 20153-0510

## Bonus Credit Report With Score Request Form

Please return in the enclosed envelope.

**YES!** Process my request for my Bonus Credit Report With Score immediately.

By signing this form, you are providing "written instructions" under the Fair Credit Reporting Act authorizing Intersections Inc. to obtain and monitor information concerning your personal credit file from one or more national credit reporting agencies. You must be enrolled in Credit Protection Plus in order to receive your bonus Credit Report.

Last Four Digits of Account Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Signature \_\_\_\_\_

## **IMPORTANT DISCLOSURES REGARDING CREDIT REPORTS**

The federal Fair Credit Reporting Act (FCRA) gives you specific rights, which are summarized below. You may have additional rights under state law. At any time, you may request and obtain your report from a consumer reporting agency. You are entitled to free reports if a person has taken adverse action against you because of information in a report; if you are the victim of identity theft or fraud; if you are on public assistance; or if you are unemployed but expect to apply for employment within 60 days. In addition, you are entitled to one free report every twelve months from each of the nationwide credit reporting agencies and from some specialized consumer reporting agencies. You may request your report beginning on December 1, 2004, or on a later date, depending on where in the country you live. Otherwise, the consumer reporting agency may impose a reasonable charge for the disclosure. For a reasonable charge, you may request your credit score from consumer reporting agencies that create and distribute scores used in residential real property loans and in some mortgage transactions receive credit score information for free.

The state of GA permits consumers to obtain two credit reports per credit reporting agency per year, free of charge. The states of MA, VT, CO, NJ, MD and ME permit consumers to obtain one credit report per credit reporting agency per year, free of charge. NOTICE TO IL RESIDENTS: MANY GOVERNMENT RECORDS ARE AVAILABLE FREE OR AT A NOMINAL COST FROM GOVERNMENT AGENCIES. CREDIT REPORTING AGENCIES ARE REQUIRED BY LAW TO GIVE YOU A COPY OF YOUR CREDIT RECORD UPON REQUEST, AT NO CHARGE OR FOR A NOMINAL FEE.

## **CREDIT REPORT AND IDENTITY THEFT RECOVERY UNIT TERMS AND CONDITIONS**

Your order for an Enhanced Credit Report, and use of the Identity Theft Recovery Unit, are governed by legal terms and conditions that are binding on you. The bonus credit report and identity theft recovery assistance are available to the protected cardholder indicated on your certificate of enrollment. These terms and conditions will be set forth in your Enhanced Credit Report Kit if you order your Enhanced Credit Report, and in your Fraud First Aid Kit if you call the Identity Theft Recovery Unit to report an identity theft or fraud incident. If you wish to receive the terms and conditions prior to ordering an Enhanced Credit Report or calling the Identity Theft Recovery Unit, you may call 1-800-839-5022 to request that the terms and conditions be sent to you free of charge. At any time and without notice to you, we may modify the terms and conditions of this bonus or cancel the bonus.

## **Frequently asked questions about the Credit Protection Plus bonuses**

### **Q: How do I request my credit report and score?**

A: To obtain a copy of your credit report with score, simply complete the form on the opposite side of this letter and mail it in the postage paid envelope provided. You should receive your credit report with score within 7-10 business day upon receipt. You must be enrolled in the Credit Protection Plus product to receive your free credit report with score.

### **Q: How often can I request my credit report and score?**

A: Your enrollment in Credit Protection Plus entitles the primary cardholder enrolled on the account to receive two free credit reports per enrollment year.

### **Q: What should I look for once I receive my credit report and score?**

A: Reviewing your credit report on a regular basis is a great way to not only ensure it is accurate, but also to help protect you from Identity Theft. Review your report to ensure your personal information (current and former addresses, employment history, credit account information, etc...) is accurate.

### **Q: What can I do if I think I have become a victim of Identity Theft? Who should I call?**

A: If you think you have been a victim of Identity Theft, we'll be here to help you. As an added bonus of your enrollment in Credit Protection Plus you automatically have access to our Identity Theft Recovery Unit at no cost to you. Contact Credit Identity Protection toll free at 1-800-839-5022 if you think you have become a victim of Identity Theft.

**Credit Protection Plus**  
**Terms and Conditions**

Credit Protection Plus ("the Plan") is an optional product available on Your Bank of America credit card account. Whether or not You purchase the Plan will not affect Your application for credit or the terms of any existing credit agreement You have with Us.

- **Benefits:** In return for a Monthly Program Fee, the Plan can credit up to 18 Monthly Benefit Amounts in the event You incur an approved Hospitalization, Total Disability, Involuntary Unemployment, or Family Medical Leave. You can also receive Three (3) Monthly Benefit Amounts for any approved Life Event. In the event of Your Loss of Life, the Plan can credit a lump sum benefit amount equal to the outstanding balance on the Date of Loss or \$25,000, whichever is less.
- **Cost:** The Monthly Program Fee is 95¢ per \$100 of Your Monthly Outstanding Balance up to \$25,000. For Your convenience, the fee is automatically billed to Your credit card account. During months when there is no balance and no activity on Your credit card statement, there is no charge for the Plan that month.
- **Eligibility Exclusions:** There are eligibility requirements, conditions and exclusions that could prevent You from receiving benefits under the Plan. Please refer to the Addendum to the Credit Card Agreement for a full explanation of all requirements, conditions and exclusions.
- **Termination:** If, at any time during the first thirty (30) days after the date Your protection begins, You cancel the optional Plan, all Plan fees billed to Your account will be refunded via a credit to the protected card. You have the right to cancel the Plan at any time by making a telephonic or written request to the Plan Administrator. The Plan will automatically terminate under the following circumstances: You no longer have the Enrolled Account; Your Enrolled Account is closed due to account charge-off; You suffer a Loss of Life; Your Enrolled Account becomes 4 payments past due, You enter into a repayment plan for the Enrolled Account, or You conduct or attempt to conduct fraud relating to Plan benefits

**The Plan Administrator is CSI Processing, LLC at Credit Protection Plus, P.O. Box 34888, Omaha, NE 68134-0888; (888) 668-6938 Monday – Friday, 7:00 a.m. – 10:00 p.m. Central Time.**

Detach here before mailing

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**IMMEDIATE RESPONSE REQUESTED:**

**Please sign, date and return in the enclosed postage paid envelope.**

**Now that You have enrolled in the *optional* Credit Protection Plus, Bank of America wants to ensure that You have received the required information for this protection. Please detach, sign and return this portion of the document to acknowledge receipt of the above stated Credit Protection Plus Terms and Conditions. You should carefully read the Addendum for a full explanation of the terms of Bank of America.**

Sign here to acknowledge receipt of the **Credit Protection Plus Terms and Conditions and the Addendum.**

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Cardholder Name (PLEASE PRINT)

Last four digits of the Protected Account Number: 0000

20060000-000-000

## **Credit Protection Plus Addendum ("the Plan")**

***This Addendum is an amendment to Your Credit Card Agreement with FIA Card Services, N.A. Please read this amendment carefully as it explains benefits, qualifications, and exclusions of Credit Protection Plus. If there is any conflict between the Credit Card Agreement and this Addendum, the terms in this Addendum shall control.***

### **I. Enrollment**

You have elected to enroll in Credit Protection Plus, an optional account feature that may provide benefits to an Enrolled Account in the event any person responsible for, or who is an Authorized User of, the Enrolled Account incurs a Protected Event. There are eligibility requirements, conditions and exclusions that could prevent You from receiving benefits under the Plan. Please read this document carefully and retain it with Your important personal records. If You have questions about the Plan, please contact the Plan Administrator at 1.888.668.6938.

### **II. Protected Events**

**a. Involuntary Unemployment** means You suffer an involuntary loss of employment as a result of layoff, termination, general strike, unionized labor dispute, or lockout. If You are Self Employed, the loss of employment must be caused exclusively by business (not personal) bankruptcy, failure or loss of required equipment to conduct Your business, or damage to Your business premises caused by fire, theft or natural disaster.

**Eligibility.** To be eligible for the Involuntary Unemployment benefit, You must have been Gainfully Employed for 30 consecutive days immediately preceding the Involuntary Unemployment. The Involuntary Unemployment must begin 60 days or more after the Effective Date and must last for a minimum of 30 days. You must also register for state unemployment benefits, qualify for state unemployment benefits if Your state unemployment law applies to You or Your employer, and register to work with a recognized employment agency. If You are a Full Time Student or are Self-Employed, You will not be required to qualify for state unemployment benefits.

**Exclusions.** This benefit is not available if Involuntary Unemployment is caused by voluntary loss of employment, resignation or retirement, Disability, or termination resulting from willful or criminal misconduct. This benefit is not available if you are receiving wages or profit from your employer or business, or for the period of time for which any lump sum payment from your employer is intended to cover. If You are Self-Employed, this benefit is not available if the Involuntary Unemployment is the result of business slowdown, maintenance or wear and tear of Your business equipment, or closure of business by a governmental agency. If You are employed for less than 1000 hours per year, such as if You are a seasonal or part-time employee, this benefit is not available.

**b. Hospitalization** or Hospitalized means that You are admitted to and remain in a hospital or school infirmary as a registered bed patient receiving care directed by a physician.

**Eligibility.** To be eligible for Hospitalization benefits You must be hospitalized for at least one night in a hospital or school infirmary and The Hospitalization must begin 60 days or more after the Effective Date

**Exclusions.** You are not eligible for this benefit if the Hospitalization resulted from an intentionally self-inflicted injury.

**c. Life Events** means Your marriage, birth or adoption of a child, moving to a new principal residence, retirement from principal employment ("Retirement"), divorce, if You become a Full Time Student, or if You are a Full Time Student, achieving academic excellence or graduation.

**Eligibility.** Academic excellence is based upon having a 3.6 grade point average on a 4-point scale, or the equivalent of a cumulative A- or higher average in a marking period. Eligibility for the divorce benefit is based upon having a finalized divorce decree issued by a court of competent jurisdiction after the Effective Date. Eligibility for the marriage benefit is based upon having a valid marriage certificate issued after the Effective Date. Eligibility for the birth or adoption benefit is based upon having a valid birth certificate

or adoption documentation issued after the Effective Date. Other documentation may be required by the Plan Administrator. The Plan Administrator may waive any of these requirements.

**Limitations.** You are eligible for up to two Life Event benefit activations each calendar year. You are only eligible for one Retirement benefit activation for the Enrolled Account.

**d. Disability** means that You were Gainfully Employed and subsequently stop performing the material and substantial duties of Your normal occupation as a result of injury or sickness.

**Eligibility.** To be eligible for the Disability benefit, You must be diagnosed by a physician as totally disabled and be under the continuous care of a physician. The Disability must begin 60 days or more after the Effective Date and must last for a minimum of 30 days. If after a Disability Benefit Activation Period You become Gainfully Employed but are then unable to work for more than 30 days due to a continuation of the same Disability, We will not require that the second Disability continue for 30 additional days. In this event, You may be eligible for additional benefits, which will be subject to the same limitations as the original Disability. If You return to work for more than 30 days following a Disability, any subsequent request for a Disability benefit will be subject to all of the limitations, exclusions, and eligibility criteria stated herein.

**Exclusions.** This benefit is not available if Disability results from an intentionally self-inflicted injury, if the Disability is the result of Your willful act or criminal misconduct, if the Disability began prior to the Effective Date, or if you are receiving wages or profit from Your employer or business.

**e. Family Leave of Absence (FLA)** means that You take an employer-approved unpaid leave of absence from Your employment.

**Eligibility.** You must have been Gainfully Employed immediately preceding the FLA and must be granted an unpaid leave of absence by Your employer. The FLA must last for a minimum of 14 consecutive days and must begin 60 days or more after the Effective date.

**Exclusions.** FLA is not available if You are Self-Employed.

**f. Loss of Life** means You die as a result of a cause not otherwise excluded in this Addendum and the Plan Administrator receives a certified death certificate.

**Exclusions.** You are not eligible for the Loss of Life benefit if the Loss of Life results from an intentionally self-inflicted injury. The Loss of Life must occur 60 days or more after the Effective Date. If the loss was caused by, or directly related to, an accidental injury, the request for benefit may be considered immediately. No more than one Loss of Life Total Debt Benefit will be credited to the Enrolled Account.

### **III. Fee**

We determine the Plan fee assessed each billing cycle by multiplying the monthly rate of \$0.95 per \$100 of the Plan balance for that billing cycle. The Plan balance is the greater of: (1) the New Balance Total less the Plan Fee billed in that billing cycle; or, (2) the total of the Balances Subject to Finance Charge. No fee is assessed on the portion of Your Plan balance over \$25,000. The fee will be shown on the Enrolled Account's monthly billing statement and added to the balance each month. No fee will be charged in any month in which there is no balance and no activity on the Enrolled Account. If You incur a Protected Event, We will cancel the Plan fee attributable to the Enrolled Account balance as of the date You incurred the Protected Event, for each billing cycle in the Benefit Activation Period.

### **IV. Benefit Amounts and Limitations**

If You incur a Protected Event, You may receive benefits under the Plan. You are eligible to receive Monthly Benefit Amounts if You incur an approved Involuntary Unemployment, Hospitalization, Life

Event, Disability or Family Leave of Absence. The Monthly Benefit Amount is the cancellation of the Total Minimum Payment Due shown on Your monthly billing statement for each billing cycle during the Benefit Activation Period. The Total Minimum Payment Due will be canceled as of its Payment Due Date. If a Total Minimum Payment Due is made by You and is later canceled by the Plan, that amount will be credited to the Enrolled Account in the next applicable billing period. If applicable, We may also cancel certain late fees, overlimit fees and other finance charges that were applied to the Enrolled Account after You incurred a Protected Event.

If You incur an approved Involuntary Unemployment, Hospitalization, Disability or Family Leave of Absence, You will be eligible to receive Monthly Benefit Amounts for as long as the Protected Event persists, up to 18 months from the date that You incurred the Protected Event. If You incur an approved Life Event, You are eligible to receive up to 3 Monthly Benefit Amounts. However, Total Monthly Benefit Amounts for any one Protected Event cannot exceed the lesser of \$25,000 or Your New Balance Total as of the date that You incur the Protected Event. And You are only eligible to receive one Monthly Benefit Amount for one Protected Event during any Enrolled Account billing cycle.

Total Debt Benefit is available in the event that You experience a Loss of Life. The Total Debt Benefit is the cancellation of Your entire Account balance, up to a maximum of \$25,000.

You are not eligible for benefits if the Protected Event occurred before Your Effective Date. You remain responsible to pay, under the terms of Your Credit Card Agreement, any balance that is not canceled under this Plan.

#### V. Frequently Used Terms

- a. "We," "Us" and "Our" refer to FIA Card Services, N.A. "You," "Yourself," "Your" and "Yours" refer to the Protected Cardholder listed on the Certificate of Enrollment and the Authorized User(s) listed on the Enrolled Account.
- b. "Authorized User" means an Authorized User as defined in Your Credit Card Agreement.
- c. "Benefit Activation Period" means the total duration of time You will receive Monthly Benefit Amounts for any Protected Event, other than Loss of Life, that You incur.
- d. "Enrolled Account" means the credit card account noted on the Certificate of Enrollment, and any other account that replaces the Enrolled Account, such as for fraud, a lost or stolen credit card, conversion, or for security reasons.
- e. "Full Time Student" means that You attend a school or program for at least 12 credit hours per semester, or the equivalent thereof, in pursuit of at least a 2-year degree.
- f. "Gainfully Employed" means that Your principal source of income is derived from salary, wages, income or other remuneration, working at least 30 hours per week (20 hours per week for Full Time Students) in employment considered to be permanent and not seasonal.
- g. "Self-Employed" means You are Gainfully Employed working in a business, trade or professional activity conducted with regularity and continuity by You or a legal entity that is owned and operated by You.

#### VI. Making a Request for Benefits

In order to receive Plan benefits, Your Enrolled Account must be less than 4 payments past due on the date of Your Protected Event and You must meet the eligibility requirements outlined in this Addendum. **You will not be eligible to receive benefits if You do not make a request for benefits and provide sufficient notice and documentation, as determined by the Plan Administrator, within 300 days of the Protected Event.**

Before Your request for Plan benefits is approved, You must continue to make at least the Total Minimum Payment Due for Your Enrolled Account each month. Failure to do so may result in the

Enrolled Account becoming past due and/or in Your loss of any promotional rate on the Enrolled Account.

To request benefit activation, please contact the Plan Administrator at 1.888.668.6938 or at Credit Protection Plus, P.O. Box 34888, Omaha, NE 68134. Upon receipt of Your request, You will be required to submit sufficient documentation, as determined by the Plan Administrator, to demonstrate the occurrence of the Protected Event.

If You do not provide sufficient documentation to the Plan Administrator within 75 days of any such request, Your request will be closed, but may be reopened upon submission of appropriate documentation.

#### VII. Continuation of Benefits

In order to continue to receive benefits for any Protected Event, other than Life Events, You will need to submit the appropriate documentation or proof requested by the Plan Administrator. Failure to do so can result in an interruption or termination of the benefit.

#### VIII. Account Availability During Benefit Activation

You will be able to use Your Enrolled Account, subject to the Credit Card Agreement, while You are in an approved benefit status. During the Benefit Activation Period, finance charges continue to accrue.

#### IX. Plan Cancellation

You may cancel Your enrollment in the Plan at any time by providing verbal or written notice to the Plan Administrator. Cancellation will take effect on the date the Plan Administrator receives Your notice. If You cancel Your enrollment within 30 days of the Effective Date, any Plan Fees will be credited back to the Enrolled Account. If You re-enroll in the Plan, You will receive a new Effective Date and will be subject to all of the exclusions and limitations associated with the new Effective Date.

We will cancel Your enrollment in the Plan if Your Enrolled Account is closed with a zero balance; the Enrolled Account is charged off as a loss by Us; You suffer a Loss of Life; You enter into a repayment plan for the Enrolled Account, or You conduct or attempt to conduct fraud relating to Plan benefits. Upon cancellation no further Plan Fee will be charged to the Enrolled Account. Protected Events that occur after Plan cancellation are not eligible for benefits.

We will suspend Your enrollment in the Plan when the Enrolled Account is four (4) payments past due. You will not be assessed a Plan fee while the Plan is suspended. And You will not be eligible for benefits for any Protected Event that You incur while the Plan is suspended. The Plan will automatically be reinstated on the first day of the billing cycle immediately following a payment that brings the Enrolled Account less than four (4) payments past due.

If We change the Enrolled Account due to fraud on the Enrolled Account, for security reasons, a lost or stolen card, or for account conversion, Your Plan protection will automatically be transferred to Your new credit card account. If You close the Enrolled Account and later reopen that account, the Plan will not automatically be applied to the reopened account.

#### X. Change to Plan Terms

We may make changes to or cancel the Plan at any time. We will provide You with at least 30 days advance written notice of any such change. If any such change does not increase the Plan Fee and is otherwise favorable to You, we may elect not to provide You with notice.

#### XI. Potential Tax Impact

Any benefit amount credited to the Enrolled Account may be considered taxable income to You or Your estate. If You have any

questions about the tax implications of Your enrollment in the Plan or of any benefit amounts You receive, please consult a tax advisor.

**XII. Arbitration**

If claims under Your Credit Card Agreement are subject to an arbitration clause, that clause applies to any claims or disputes regarding the Plan.

**XIII. Waiver**

A waiver of one or more Plan requirements by Us or the Plan Administrator does not require Us to waive that same requirement in any other situation or for any other cardholder, nor does it constitute a waiver of any other Plan requirements.



# Get up to \$3,000 in benefits to help pay your monthly bills.



## Credit Protection Deluxe can help you stay on track when life gets expensive.

You've already taken an important step to help protect your Bank of America credit card. Now, take an easy step to get even more protection by enrolling for Credit Protection Deluxe.

With this optional Bank of America credit card feature, you can get up to a total of \$3,000 in monthly benefits (credited directly to your Bank of America credit card in \$500 monthly installments) for protected events. And what's more, you don't have to pay back any of the monthly benefits credited to your account.

You'll be able to tap into your Credit Protection Deluxe benefits when you need it most by using your Bank of America credit card to help pay your other bills.

## Affordable and convenient—just \$19.99 a month.

For your convenience, the Credit Protection Deluxe fee will be automatically reflected on your Bank of America credit card statement. So, you don't have to write another check to pay for Credit Protection Deluxe.

## Enroll today—no-obligation, 30-day review period.

When you enroll in Credit Protection Deluxe, you'll have 30 days from the date your protection begins to evaluate the benefits of this program. If, during this time, you decide Credit Protection Deluxe isn't right for you, just call the Credit Protection Plus plan administrator at 1.888.668.6938 to cancel your protection. We'll credit any protection fees that have been billed to your account.

## Added "peace of mind" protection for the unexpected.

Credit Protection Deluxe can credit up to six monthly benefit amounts to your account in the event you or anyone else authorized to use your card:

- loses a job involuntarily
- takes an unpaid Family Leave of Absence to care for a loved one

Plus, in the event of a disabling illness or injury, Credit Protection Deluxe can credit up to three monthly benefits to your account.

## More financial relief when your life takes a turn.

Credit Protection Deluxe can also credit one monthly benefit amount to your account in the event you or anyone else authorized to use your card:

- gets married
- gets divorced
- has a child or adopts a child
- moves
- enrolls in college, achieves academic excellence or graduates
- retires

You can qualify for any two life events each plan year. (Note: Only one Retirement benefit can be received for an Enrolled Account.)

See Important Information on Back.

Detach here before mailing.

## Credit Protection Deluxe Enrollment Form

Please complete and sign this form to enroll in Credit Protection Deluxe. Then, detach and return it in the postage-paid envelope provided.

**Yes.** To enroll in Credit Protection Deluxe, please sign this form. By signing and completing this form and submitting it to the Credit Protection Deluxe Plan Administrator (CSI Processing, LLC, a non-affiliate of Bank of America, N.A.), I understand I will be enrolled in Credit Protection Deluxe and my credit card will be billed each month for the protection fee of \$19.99. I understand I have 30 days from the enrollment date to review the plan to determine if it's right for me and my family. And, if I contact the plan administrator to cancel the protection plan during that 30-day review period, any Credit Protection Deluxe fees that have been billed to my account will be credited. I have read the important terms and conditions on the back page and understand I will be mailed detailed information upon enrolling in Credit Protection Deluxe.

Please call toll-free if you have any questions about Credit Protection Deluxe: 1.888.668.6938.

JANE DOE  
123 ANY STREET  
APT 1  
CITY, ST 12345-6789

Last 4 digits of protected account number: XXXX

Sign Here to Enroll:

Today's Date

X

/ /

Form: XXXX

## **Important Information about Credit Protection Deluxe Terms and Conditions**

Credit Protection Deluxe ("the Plan") is an optional product available on Your Bank of America credit card account. Whether or not You purchase the Plan will not affect Your application for credit or the terms of any existing credit agreement You have with Us.

- **Benefits:** In return for a Monthly Program Fee, the Plan can credit up to Six (6) Monthly Benefit Amounts in the event You incur an approved Total Disability, Involuntary Unemployment or Family Medical Leave. You can also receive One (1) Monthly Benefit Amount for any approved Life Event. The monthly benefit amount is \$500 for a maximum benefit of \$3,000. The Monthly Benefit may be reduced based upon Your outstanding account balance. Please refer to the Addendum to the Credit Card Agreement for a full explanation.
- **Cost:** The Monthly Program Fee is \$19.99. For Your convenience, the fee is automatically billed to Your credit card account.
- **Eligibility Exclusions:** There are eligibility requirements, conditions and exclusions that could prevent You from receiving benefits under the Plan. Please refer to the Addendum to the Credit Card Agreement for a full explanation of all requirements, conditions and exclusions.
- **Termination:** If, at any time during the first Thirty (30) days after the date Your protection begins, You cancel the optional Plan, all Plan fees billed to Your account will be refunded via a credit to the protected card. You have the right to cancel the Plan at any time by making a telephonic or written request to the Plan Administrator. The Plan will automatically terminate under the following circumstances: You no longer have the Enrolled Account; Your Enrolled Account is closed due to account charge-off; You suffer a Loss of Life; Your Enrolled Account becomes Four (4) payments past due, You enter into a repayment plan for the Enrolled Account, or You conduct or attempt to conduct fraud relating to Plan benefits

The Plan Administrator is CSJ Processing, LLC at Credit Protection Deluxe, P.O. Box 34888, Omaha, NE 68134-0888; 1.888.668.6938 Monday - Friday, 7 a.m. to 10 p.m. Central Time, and Saturday, 8 a.m. to 4:30 p.m, Central Time.