

# How to File a Claim

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**In the event of a claim, the following procedures should be followed:**

- 1) You (Cardholder) or the beneficiary or someone legally acting on behalf of either, must notify us as required in the Claim Notification Period, or your claim may be denied. Upon receipt of a notice of claim, the Plan Administrator, Claims Administrator or Insurance Company, will furnish to a claimant the necessary Claim Form(s);
- 2) Complete the Claim Form(s) in its entirety signed and dated;
- 3) Submit all Required Information (proof of loss), as outlined in this section no later than the Submission Period.

*Please note, there may be additional information requested at times in order to process your claim. It is your responsibility to provide this information in order to process the claim.*

For assistance with filing a claim, please call **(800) MC ASSIST (800 622 7747)** in the US or call the MasterCard Global Service™ toll-free number in your country. If you are unable to access the toll-free number, please call the MasterCard Global Service™ collect number **(636) 722 7111**.

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## MasterRental™

**Claim Notification Period:** Within thirty (30) days from the date of occurrence.

**Submission Period:** No later than one hundred-eighty (180) days from the date of Claim Notification.

**Required Information (proof of loss):**

- a) Completed claim form signed and dated;
  - b) An original receipt showing payment of the Rental was made entirely with the eligible Card;
  - c) Copies of the original rental agreement (front and back);
  - d) Copies of certified police reports, if applicable (upon request);
  - e) An internal damage document such as an "Incident/Accident Report" from Rental Company, an itemised repair bill or estimate,
  - f) Other documentation such as MasterCard Rewards Programme and Rental Company promotional material, etc. if applicable
  - g) Copies of the Rental Company's Fleet Utilisation log if "Loss of Use" charges are being claimed;
  - h) Your Cardholder's monthly statement of account showing the account is open and in good standing at the time of filing the claim.
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## MasterTravel™

**Claim Notification Period:** Within ninety (90) days from the date of loss.

**Submission Period:** No later than one hundred-eighty (180) days from the date of Claim Notification.

**Required Information (proof of loss):**

- a) Completed claim form signed and dated;
- b) Documentation detailing the nature of injury or sickness with a breakdown of expenses, including certified copies of: medical evidence reports, attending physician statements, coroner reports, death certificate and related documentation;
- c) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible Card, including copies of Common Carrier ticket(s) and receipts;
- d) Your Cardholder's statement of account showing the account is open and in good standing at the time of filing the claim.

# How to File a Claim

## MasterAssist Plus™\*

**Claim Notification Period:** Within ninety (90) days from the date of loss.

**Submission Period:** No later than one hundred-eighty (180) days from the date of Claim Notification.

### Required Information (proof of loss):

- a) Completed claim form signed and dated;
- b) Documentation detailing the nature of injury or sickness with a breakdown of expenses, including certified copies of: medical evidence reports, attending physician statements, medical receipts and related documentation;
- c) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible Card, including copies of Common Carrier ticket(s) and receipts;
- d) Your Cardholder's statement of account showing the account is open and in good standing at the time of filing the claim.

*\*MasterAssist Plus™ offers "Cashless Service" for Medical Expenses. For questions or to obtain assistance with Cashless Services please refer to the MasterAssist Plus™ section in this guide.*

**You can now upload all required documentation for all benefits herein by visiting our claim site at [www.yourclaimstatus.com](http://www.yourclaimstatus.com) or via the following methods:**

Email: [mcresponse@ufac-claims.com](mailto:mcresponse@ufac-claims.com)

Fax: (440) 914 2889

Mail: MasterCard Benefits Assistance Centre  
c/o Programme Administrator at  
Sedgwick Claims Management Services, Inc.  
PO Box 89405  
Cleveland, OH, 44101-6405  
USA

### Payment of claims:

Where allowable by law, Benefit for loss of life is payable to the beneficiary designated by the Insured Person. If there has been no such designation, then payment of claim will be to the Insured Person's first surviving beneficiary as follows:

- a) Spouse or Domestic Partner;
- b) Children, in equal shares;
- c) Parents, in equal shares;
- d) Brothers and sisters, in equal shares; or
- e) Executor or administrator

All other benefits will be paid to the Insured Person or other appropriate party where necessary. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

▲ *Each insurance benefit limit described in this Guide is in United States dollars (USD). Payment of claims will be made in local currency where required by law, with the official Foreign Exchange Rates published on the date the claim is paid.*

*Where services are provided by organisations other than Butterfield, the Bank shall have no responsibility or liability for them, or for their mention in this document, or for their continuance.*

Butterfield



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