## **AIG CUBA TRAVEL CERTIFICATION**

## 1. Instructions

AIG may only provide insurance to persons subject to U.S. jurisdiction that are traveling to Cuba if such persons are authorized under U.S. law. Travelers are authorized by the United States Department of the Treasury's Office of Foreign Assets Control (OFAC) through either (a) one of 12 general licenses or (b) issuance of a specific license.

AIG's ability to perform is based on the validity of this certification, if this certification is deemed to be incorrect or false, AIG will not perform under the policy. Please read the criteria for the license under which you plan to travel in the Attachment to this Certification and then confirm in Section 2 below that you meet all requirements. Note that a new Certification is required for each trip to Cuba and a separate Certification is required for each adult traveling.

All completed Certifications must be returned to the AlG business unit writing the policy.

## 2. Certification

I am a United States citizen, a United States permanent resident, a person currently residing in the United States, or a person physically located in the United States and, as a condition of receiving the travel insurance provided herein, I represent that I am eligible to travel to Cuba under one of the following categories:

Select applicable category:

Ge	eneral License:
	Family visits as specified in 31 C.F.R. § 515.561 (includes persons visiting a "close relative" who is a national of Cuba;
	or accompanying a person with whom you share a common dwelling who is visiting a "close relative" who is a pational
	of Cuba; or visiting a close relative located in Cuba pursuant to or accompanying a close relative traveling to Cuba
	pursuant to authorizations for: official government business, journalistic activity, professional research, education
	activities, religious activities, humanitarian projects or activities of private foundations or research/educational institutes)
_	Official business of the U.S. government, foreign governments, and certain intergovernmental organizations as specified in 31 C.F.R. § 515.562
	Journalistic activity as specified in 31 C.F.R. § 515.563
	Professional research and professional meetings as specified in 31 C.F.R. 8 515.564
	Educational & Group People-to-People activities as specified in 31 C.F.R. § 515.565. One of the two boxes below also
	must be checked:
	I am traveling under the auspices of an accredited academic institution and will resistain a full since at a 1 c.
	☐ I am traveling under the auspices of an accredited academic institution and will maintain a full-time schedule of educational exchange activities OR
	☐ I am traveling with an organization/group, will maintain a full-time schedule of educational exchange activities
	and I have completed at least one travel-related transaction (such as purchasing a flight or reserving
5.0	accommodation) prior to June 5, 2019
	Religious activities as specified in 31 C.F.R. § 515.566
ш	Public performances, clinics, workshops, athletic and other competitions, and exhibitions as specified in 31 C.F.R. § 515.567
	Support for the Cuban people as specified in 31 C.F.R. § 515.574
	Humanitarian projects as specified in 31 C.F.R. § 515.575
	Activities of private foundations or research or educational institutes as specified in 31 C.F.R. § 515.576
	Exportation, importation, or transmission of information or informational materials as specified in
	3I C.F.R. § 515.545
	Certain export and travel-related transactions consistent with the export or reexport licensing
	policy of the Department of Commerce as specified in 31 C.F.R. § 515.533 or certain other export
	transactions as specified in 31 C.F.R. § 515.559
	OR
Spe	cific License:
	Specific license (a copy of the license must be provided prior to purchase)

Select

Only One

CUBA TRAVEL ( Name: (First) (Middle) (Last) Address: (No.) (Streat) (City) (State) (Zip Code) Telephone Number/Email: Note: Regulations issued on November 8, 2017 generally prohibit persons traveling under these travel authorizations from engaging in direct financial transactions with persons and envities designated on the Cuba Restricted List, available here: https://www.state.gov/e/eb/ris/spi/cuba/cubarestrictedlist/275331.htm. This list includes hotels, stores, marinas and other entities. All authorized individuals traveling to Cuba should review this list and ensure that they are complying with these prohibitions. AIG is generally prohibited from paying claims related to transactions that violate this prohibition. I hereby certify that I have read the relevant portions of the Attachment to the AIG Cuba Travel Certification including the provision of regulations applicable to the above selected category and that all of the above information is true and accurate. (Signature) (Date) I hereby certify that this certification also applies to the following minor children \_\_\_\_\_\_for whom I am the (parent/legal guardian): (Full Name of Child) (Date of Birth) (Full Name of Child) (Date of Birth) (Full Name of Child) (Date of Birth) (Full Name of Child) (Date of Birth)

(Signature of Farent/Legal Guardian)

Date: