



Travel Assistance Insurance Policy Policyholder: MUTUALIDAD GENERAL JUDICIAL

The Policyholder has subscribed with SOS SEGUROS Y REASEGUROS, S.A., is part of the INTERNATIONAL SOS GROUP, with registered address in Madrid, c/ Ribera del Loira, 4-6, with C.I.F.: A-78562246, and number C-627 of Insurance Companies Register of Dirección General de Seguros y Fondos de Pensiones, the Travel Assistance Insurance Policy for companies N° 42546 taking effect 01/01/2020 until 31/01/2020, with worldwide coverage and with guarantees and limits such as detailed below:

COVERAGES

	<u>COVERAGES (*)</u>	<u>LIMITS PER CLAIM/ EUROS</u>
1.	Medical, surgical, pharmaceutical and/or hospitalisation expenses abroad:	30.000 €
2.	Urgent dental expenses:	600 €
3.	Repatriation or removal for health reasons:	Covered
4.	Convalescence hotel expenses:	100 € day/10 days max.
5.	Travelling costs for a companion:	Covered
6.	Accommodation expenses for the companion of the hospitalized insured person	100 € day/10 days max.
7.	Removal of the mortal remains and travelling costs for a companion:	10.000 €
	Accommodation to accompany the mortal remains:	100 day/3 days max.
8.	Travel information service:	Covered

PROCEDURES IN THE EVENT OF A CLAIM:

Assistance should be requested by making a reverse charge call to the number 91.572.43.43 and for internationals the number is 34.91.572.43.43; the following information must be provided:

- * Name and surnames.
- * Policy number.
- * Address and telephone number of the place where you are located.
- * Description of the existing problem.

Those covers and services not requested from the Insurer, which have not been performed by same or with their authorization, shall not be entitled to a subsequent payment or a compensation, however if the Insured could not contact the Assistance Centre due to a force majeure situation, the payment of costs may be requested by writing to SOS SEGUROS Y REASEGUROS, S.A. c/ Ribera del Loira, 4-6, 28042 MADRID and attaching the following:

- * Reasons why the Assistance Centre was not contacted.
- * Policy number.
- * Original copy of the invoices and receipts of the claimed expenses.
- * Medical report containing the diagnosis of the disease, and where applicable, the need for the repatriation.
- * Death certificate and documentation that certifies the degree of kinship with the deceased in the case of repatriation of a deceased relative.

(*) The present document is included for informative effects. It is not a contractual document, so it does not substitute the General Conditions and Particulars, and the limits and exclusions of the policy itself, will prevail in case of discrepancy.

