## **American Bankers Insurance Company of Florida**

A Stock Insurance Company 11222 Quail Roost Drive, Miami, FL 33157-6596 (305) 253-2244

## For questions or to report a claim, please call (800)789-2720

## **IDENTITY FRAUD** CERTIFICATE DECLARATIONS PAGE

Certificate Number: Pro+ Cyber - 2022

Master Policy Number: IFS-31-TX-1

Certificate Holder Name and Mailing Address:

N/A

Master Policyholder Name and Mailing Address:

InfoArmor, Inc. 7350 N. Dobson Rd., Suite 101 Scottsdale, AZ 85256

Policy Period: From 01/01/2022 To: Continuous Until Cancelled 12:01 a.m. standard time at your mailing address shown above.

In return for the payment of the premium, and subject to all terms of this Certificate, we agree with the Master Policyholder to provide Insurance as stated in this Certificate.

## **Aggregate Limit** Coverage/Deductible of Liability

Plan Type: Pro+ Cyber Single & Family Plan

\$2,000,000 per Family membership per 12 Month Period Expense Reimbursement

\$1,000,000 per Single membership per 12 Month Period

\$1,000,000 Sublimit per Single/Family membership per 12 Cash Recovery Aggregate

month period. Sublimit is part of and not in addition to Expense

Reimbursement Aggregate Limit of Liability

\$1,000,000 Sublimit per Family/Single membership per 12 Investment & Health Savings Accounts Cash Recovery

month period. Sublimit is part of and not in addition to Expense

Reimbursement Aggregate Limit of Liability

Association Member Deductible: \$0

Premium: Paid by Policyholder

Certificate of Insurance: IFS-31-TX-1 Certificate of Insurance With HSA Endorsement.pdf

Form Numbers of Coverage Forms, Endorsements and other forms that are part of this Certificate.

IFS0003C-1016 IFS0005E-1015 N8051-0415 IFS0025E-0317 IFS0020E-0916 IFS0041E-0219