

**AIG Insurance Company - Puerto Rico**

**PERSONAL ACCIDENT**

**Policy No. 038 – 000002193-02-000000**



**INVOICE**

**ISSUE DATE : June 4, 2014**

**INVOICE : 038-000002193-02-000000**

**Named Insured & Mailing Address**

P4G LLC (1141493)

URB EL MIRADOR DE CUPEY  
G-1 CALLE 7  
RIO PIEDRAS, PR 00926-

**Producer Name (Code) & Mailing Address**

FULCRO INSURANCE, INC. (169)  
PO BOX 9024048

SAN JUAN, PR 00902-4048

**Description Kind of Insurance**

PERSONAL ACCIDENT

**Policy No.**

038-000002193-02-000000

**Policy Period**

From August 13, 2014 To August 13, 2015 12:01 AM Standard Time at the insured's premise.

TrN	Description	Premium	Assessment Fees	Total Premium
1	RENEWAL	\$ 500.00	\$ 0.00	\$ 500.00
<b>Totals:</b>		\$ 500.00		\$ 500.00

# AIG Insurance Company - Puerto Rico

## PERSONAL ACCIDENT

Policy No. 038 - 000002193-02-000000



Renewal Of: 038-000002193-01

In consideration of the payment of premium in the manner and at the time stated in Item 6 of Section 1, Declarations, the **Company** agrees with the **Policyholder** named in the Declarations (herein called the **Policyholder**) to insure eligible persons of the **Policyholder** (herein individually called **Insured Person**), to the extent herein provided and subject to all of the exceptions, limitations and provisions of the policy.

### Section I

#### 1. Name of Policyholder & Mailing Address

RENEWAL

P4G LLC (1141493)

URB EL MIRADOR DE CUPEY  
G-1 CALLE 7  
RIO PIEDRAS, PR 00926-

#### 2. Policy Period

From August 13, 2014 To August 13, 2015 12:01 AM Standard Time at the insured's premise.

#### 3. Eligible Persons: The following persons shall be eligible for insurance hereunder:

Class	Description of Class	Maximum Age
I		69

#### 4. Schedule of Benefits:

The Insurance afforded hereunder is only with respect to such and so many of the indemnities as are indicated by specific amount set each such indemnity listed in this Schedule and is only with respect to Insured Persons in the classes designated herein. Indemnities afforded hereunder are so indicated by the word "Nil" set below each such indemnity listing.

#### Class

Coverage	Limit
PLAN P.A. GROUP	
SMPA ACCIDENTAL DEATH SELF	\$ 20,000.00
SMPA ACCIDENTAL DISMEMBERMENT	\$ 20,000.00
SMPA ACCIDENT MEDICAL EXPENSE REIMBURSEMENT	\$ 3,000.00

5. Aggregate Limit of Indemnity per Accident applicable: \$ 45,000.00

Aggregate Limit of Indemnity per Year applicable: \$ 90,000.00

6. Premium: The premium for this policy shall be determined as follows:

Class	Rate per Unit of Exposure	Premium
PLAN P.A. GROUP		\$ 500.00

Estimated Annual Premium-Subject to Audit: N/A

Total Premium-Not Subject to Audit: \$ 500.00

The Estimated Annual Premium - Subject to Audit, or Annual Premium - Not Subject to Audit, shall, if entries are stated herein, be payable in N/A equal installments, each installment due and payable on the N/A day of N/A.

#### 7. Policy at Issue : June 4, 2014

The following forms constitute the entire policy at issue:

01End Generico - AGGL - BT31972 - BT31973-B - BT34151 - Jacket SRP - PP&C-01 - SRP24185/10 - SRP24185/3 - SRP24185/4 - SRP24185/5 - SRP24185/9 - TERR (ENG) - WAR NBC

Ave. Muñoz Rivera 250, Hato Rey, Puerto Rico 00918  
PO Box 10181, San Juan, Puerto Rico 00908-1181  
Tel. (787) 767-6400 - www.aig.com

Insured's Copy



**AIG Insurance Company - Puerto Rico**

**PERSONAL ACCIDENT**

**Policy No. 038 – 000002193-02-000000**



Renewal Of: 038-000002193-01

Countersigned At: SAN JUAN, PR June 4, 2014  
FULCRO INSURANCE, INC. (169)

A handwritten signature in black ink, appearing to read "Glorimary Arregui".

\_\_\_\_\_  
Glorimary Arregui  
Authorized Representative

**Ave. Muñoz Rivera 250, Hato Rey, Puerto Rico 00918**  
**PO Box 10181, San Juan, Puerto Rico 00908-1181**  
**Tel. (787) 767-6400 – www.aig.com**

**Insured's Copy**