

# AIG Europe Limited

# CorporateGuard Civil Liability

#### Note to Proposer

Please note that this proposal form is being completed on behalf of all insureds.

Signing or completing this proposal does not bind the Proposer, or any individual or entity he or she is representing, to complete this insurance.

Please provide by addendum any supplementary information which is material to the response of the questions herein. For the purpose of this proposal form, "Fund" shall be deemed to include all trusts, investment management companies (open or closed ended), funds and partnerships.

For the purpose of this proposal form "Commingled funds" shall mean any assets which are managed by the Proposer on behalf of third parties which are not part of the "Funds" investment structure.

For the purpose of this proposal form "FUM" shall mean Funds Under Management, and "NAV" shall mean Net Asset Value. For the purposes of the 'Services' sections of the proposal form, only complete those sections where the services are offered to third parties.

# **Proposer Details**

Name of Proposer			
Principal mailing address line one			
Principal mailing address line two			
City and postcode			
Country of registration			
How long as the company continually carried on business?  Has the capital structure of the Parent Company changed?	Yes	No	
If 'Yes' please attach details.			
Is the Company intending a new public offering of securities within the next year in the UK or elsewhere (including a registration statement of intent to file)?	Yes	No	
Has the Proposer been involved in, or been subject to, any mergers or acquisitions in the past five years?	Yes	No	
If 'Yes', please provide details			
Are any plans for merger or acquisition, consolidation or divestment being considered?	Yes	No	
If 'Yes', please provide details on a	separate sheet.		
Is the Proposer:			
Privately owned?	Yes	No	
Publicly owned?	Yes	No	
Listed on a US Stock Exchange?	Yes	No	

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If 'Yes', please provide:						
Current market capitalisation in the	JS				\$	
Percentage of shares traded as ADF	Rs				%	
Listed on any other Exchange?	Yes		No			
If 'Yes', which exchanges?						
Please state:						
Total number of shares held by direct	ctors and officers					
All shareholdings greater than 15% of the ordinary share capital		Share	holder			% Held
Please state:						
Numbers	Current Year	Pre	vious Year	US (Current Y	ear)	Turnover (Last Year)
number of employees (including temporary staff and outsourced employee roles)					,	
number of Personnel/ training staff						
compliance department and internal audit staff numbers						
directors and officers						
sales staff, professional staff or any employees directly involved with third parties						
support staff						
Please state the percentage split be	tween distribution cha	ınnels us	sed by the Prop	oser:		
	Current Year	%	Previous	s Year %	(C)	% in the US urrent Year Only)
advisory staff/ professional/sales staff					(0)	urrent rear Only)
directly (via mail, telephone, etc)						
agents, IFAs						
internet						
Does the Proposer monitor the advice provided by individuals that are not under their daily control and supervision? (eg Agents/IFAs)	Yes		No			
If 'No', please provide details on a se	eparate sheet.					

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# **Proposer Services**

Please provide the approximate percentages of the Proposer's total revenues which were derived from the following activities:

	Current Year %	Previous Year %	% in the US (Current Year Only)
Loans			
(a) Retail			
(b) Commercial			
(c) Syndication			
Trade financing			
Securities trading/dealing *			
(a) Execution *			
(b) Advisory *			
Commodities trading/dealing*  Derivatives or specialist trading/ dealing *  Structured financial product advice			
Acting as securities broker/ dealer			
Acting as custodian/depositor or managing agent for securities or money  (a) Financial, investment or economic advisor with regard to mergers, acquisitions or capital restructuring * Financial, investment or economic advisor with regard to share placing/new issues *			
(a) equity issuance*			
(b) debt issuance*			
Financial, investment or economic advisor with regard to venture capital Financial, investment or economic advisor with regard to other Administration of trusts, estates or guardianships*			
Asset or fund management*			
Provision of insurance products or services  Acting as a dividend disbursement agent, redemption or subscription agent, warrant or script agent, fixed or paying agent, tax withholding agent, escrow agent, registrar, transfer agent or clearing agent Acting as a tax planner and or tax advisor to trusts, estates and			

	Current Year %	Previous Year %	% in the US (Current Year Only)
Acting as a real estate broker, or providing surveying or conveyancing services  Sale of traveller cheques, certified cheques or money orders, or			
administration or sale of credit cards, or credit card services			
Provision of legal advice to third parties			
Leasing			
Foreign Exchange			
Please list any other services or activ	ities not stated above on a s	separate sheet	
* Please complete the relevant supple	emental proposal at the end	of this document if you provide	de these services to client.
Has the Proposer offered any new services over the past 12 months or is there the intention to			
do so over the next 12 months?	Yes	No	
If 'Yes', please provide details			
Are all the advisory services rendered subject to written agreement, contractual agreement, service agreement or letter of appointment?	Yes	No	
If 'No', please provide details on a se			
Are all new products subject to a 'New Product Approval Process' which includes sign off from the business unit manager, compliance and legal?	Yes	No	
Are all publications, marketing literature, or other product services communications (electronic or documentary), subject to legal review prior to their release to third parties?	Yes	No	
If 'No', please provide details on a se	parate sheet.		
Internal Controls			
Does the Proposer have a fully staffe	d and appropriately qualified	l:	
Internal Audit Department?	Yes	No	
If 'Yes', current number?			
Compliance Department?	Yes	No	
If 'Yes', current number?			
Are regular audits conducted by the internal audit department on a risk critical basis?	Yes	No	

To whom does the internal audit dep	partment report?		
Name/Title:			
Does the internal audit team periodi	cally perform indepe	endent checks on:	
Segregation of duties?	Yes	No	
Accuracy of records?	Yes	No	
Reporting procedures to management/clients?	Yes	No	
Management and supervisory procedures?	Yes	No	
Training requirements, and competency of staff?	Yes	No	
Suitability of advice provided to third parties?	Yes	No	
Adequacy of systems?	Yes	No	
Authority levels (appropriateness and monitoring)?	Yes	No	
Are any recommendations made by internal auditors implemented as soon as possible?	Yes	No	
If 'No', please provide details on a s	eparate sheet.		
Are there any material recommendations from external auditors yet to be implemented?	Yes	No	
Regulatory and Compliance	e		
Does the Proposer have a dedicated Compliance Officer/ department charged with ensuring compliance by all staff of the regulatory rules, principles, codes and guidelines?	Yes	No	
If 'No', please provide details on a s	eparate sheet.		
Does the compliance officer report to management of the investment adviser?	Yes	No	
Does the compliance officer report to the board of directors or audit committee of the investment company?	Yes	No	
How many people are employed in	the compliance func	tion?	
To whom does the compliance man	ager report?		
Name/Title:			

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Has the Proposer or any insured entity, or any of its directors, officers, partners or employees been subject to any regulatory investigation?

Yes No

#### If 'Yes', please provide details on a separate sheet.

Did such an investigation result in disciplinary proceedings, admonishments or recommendations?

No

#### If 'Yes', please provide details on a separate sheet.

If 'Yes', were all the

recommendations implemented? Yes No

Yes

#### If 'No', please provide details on a separate sheet.

If applicable, are all recommendations made following a regulatory visit fully implemented?

Yes No

#### If 'No', please provide details on a separate sheet.

Are you fully in compliance with regulatory mandates and industry best practices concerning anti-money laundering procedures?

procedures? Yes No

Do you maintain a Code of Ethics that governs personal trading practices of employees and other persons who have access to information about portfolio holdings of the investment

companies ("access persons")? Yes No

Do you allow access persons to trade for their own account or for accounts over which they have control?

Yes No

Do you require access persons to report all personal trades for their own accounts or accounts over which they have control?

h they have control? Yes No

Do you require access persons to report trades of shares of the investment companies?

Yes No

If applicable, have you

implemented a trackable 'Treating your customers fairly' project? Yes No

#### Services: Internet Banking/E-Commerce

# Please complete this Section only if Internet Banking/E-Commerce Services are offered to Clients

Do you provide an Internet

facility? Yes No

If 'Yes', do you offer any of the following:

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Product information only?	Yes	No	
Account balance?	Yes	No	
Pre-authorised account to account transfers?	Yes	No	
Loan applications?	Yes	No	
Interactive mortgage applications?	Yes	No	
Business/company account management?	Yes	No	
Insurance products?	Yes	No	
On-line securities dealing?	Yes	No	
Other, (please specify)			
Please select the method used to veri	fy the identity of the	users transacting via th	e Internet:
Please select the method used to	Static Passwo	rd	One-time password
verify the identity of the users transacting via the Internet	Public/ private	key encryption	Digital signatures
	Other (please	provide details)	
How is the integrity of any given	128 bit encryp	tion	Message authentication
transaction protected?	Receipt confirm	mation	
	Other (please	provide details)	
How does the Proposer prevent	Firewall		Off-line front-end processing
unauthorised access to clients'/ investors' main processing systems?	On-line front-e	end filtering	Data encryption
Systems?	Other (please	provide details)	
Do you utilise a tracking device in relation to the Internet facilities?	Yes	No	
Do you have formal terms and conditions for use of your Internet Service which outlines the obligations and responsibilities of the users?	Yes	No	
Does the Proposer have procedures in place to monitor to whom their services are provided, taking into account any jurisdictional or cross border issues?	Yes	No	
Do you use any anti-virus software?	Yes	No	
If 'Yes', is it upgraded on a regular basis?	Yes	No	
	103	140	

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# Services: Fund Management

# Please complete this Section only if Fund Management Services are offered to Clients

List of all funds with the following information:

Name	NAV	Last Year NAV	Open or Closed	% Invested	Location Traded

Please continue on a separate she	et if necessary				
Please provide:					
Funds under management (FUM):			Current Year £ Pre		ous Year £
	Net asset value				
	Lost accounts				
	New accounts				
The percentage split between:					%
(please note that (i) and (ii) are separate questions)	(i) discretionary FUI	M			
	non-discretionary FUM				
	(ii) assets in Funds				
	assets in Commi	ngled funds			
Please indicate the percentage			Current Year %	Previ	ous Year %
split of the Funds Under Management (FUM) in the	UK and Europe				
following territories:	North America				
	Far East/Middle East	/Asia			
	South America				
Please indicate the percentage			Current Year %	Previ	ous Year %
split of the Funds Under Management (FUM) invested in	Securities				
the following areas:	Debt				
	Unlisted or private investment				
	Property				
	commodities, derivati or specialist investme strategy (including he funds)	ent			
	ERISA plans				

Are performance reports regularly issued to clients?	Yes	No		
Number of discretionary accounts		Number		
and total value of such accounts.		Total Value	£	
What is the value of the largest acco	ount?		£	
Please indicate % of FUM from		Current Year		%
US investors?		Previous Year		%
Please indicate client type FUM		Institutional		%
split (%):		HNW		%
		Retail		%
Are there any changes in any fund of 50% of NAV or any funds that have been liquidated in last 12 months?	Yes	No		
If 'Yes', please details on a separate	e sheet.			
Do you or any of your affiliates allow any investors to engage in the investment strategy known as mutual fund "Market Timing" (the practice of making short-term purchases and sales of mutual funds)?				
If 'Yes', please identify on a separat	e sheet the parties with	whom there exists such an arra	angement.	
Do you monitor the investment companies for abnormal trading patterns?	Yes	No		
Do you impose early trading cut- offs to account for Market Timing?	Yes	No		
Do you impose redemption fees on shareholders who redeem within a short period of time?	Yes	No		
Do you use fair value pricing for NAV valuation?	Yes	No		
Do you have a procedure in place to	regularly monitor:			
Suitability of investments to investor profile	Yes	No		
Adherence with investment mandate agreement or prospectus?	Yes	No		
Do you have a stop loss system or 'preventative' trading system in place which tracks to the original investment mandate or engagement?	Yes	No		
Have you had any trading errors resulting in a loss > £50,000 in the last 3 years?	Yes	No		
If 'Yes', please provide details of rer	nedial steps.			

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Have any changes to the investment restrictions been agreed by all clients? Yes No Services: Trust Services Please complete this Section only if Trust Services are offered to Clients Are trust services limited to purely administration services? Yes No If 'No' do these services include investment appraisal, investment advice, or investment management? Yes No Please provide the value of: £ Total trusts under management £ Asset value of the largest account Highest fee £ What is the average length of trust experience for all trust officers? Years Current Year % Previous Year % Please indicate the percentage split of the Funds Under **UK** and Europe Management (FUM) in the following territories: Far East/Middle East/Asia South America North America Is there a dual control over any material recommendations suggested by a trust officer? Yes No Services: Trading Please complete this Section only if Trading Services are offered to Clients Please detail the following: The percentage split in income Proprietary trading % between: % Third party trading The percentage split in third party Listed securities % fee income derived from Unlisted securities % investments in: % Emerging markets (listed/ unlisted) Debt instruments % Real Estate / Property % Commodities % Derivative instruments - hedging % % Derivative instruments – speculative

Limited Partnerships

Other (please specify)

%

%

Does the Proposer have adequate controls and procedures in place in order to ensure the following?:						
Accuracy of transactions	Yes	No				
Trading limits are adhered to and monitored	Yes	No				
Segregation between front and back office functions is maintained	Yes	No				
Timely recognition of any material trading losses	Yes	No				
New products/services undergo a robust due diligence/approval process	Yes	No				
Breaches are identified immediately	Yes	No				
Unauthorised trading or trade errors are detected immediately	Yes	No				
From how many locations do you tra	de?					
Are all trading counter-parties periodically and independently monitored and approved for credit worthiness and limits on at least a						
monthly basis?	Yes	No				
If 'No', please provide details						
L						
Are all trades entered immediately?	Yes	No				
Do you allow remote trading?	Yes	No				
If 'Yes', please detail controls:						
Are all trade confirmations (counter party side) independent from the trading function?	Yes	No				
Is back office confirmation of trades with counter-parties done on the same day as the trade?	Yes	No				
Trade exception processing routines and related reporting of exceptions	Yes	No				
How often are trading records reconciled?	Yes	No				
Is there a complete separation of duties within trading and real time monitoring of traders to ensure that trading limits are in compliance?	Yes	No				
Are all "anomalies" (non- conforming trades) reported to the Risk Management						
department and internal audit?	Yes	No				

Do management follow up on all of these?	Yes	No	
Do you track employee trading accounts?	Yes	No	
Does your system monitor for any unusual trading activity e.g. churning, suitability, etc.?	Yes	No	
Are all trading conversations recorded?	Yes	No	
Do you offer on-line trading?	Yes	No	
If so, are all transactions recorded?	Yes	No	
How long are records maintained?			
Are all trades entered immediately into a system or within a certain time frame?	Yes	No	
Does company's computer system a			hat is not with
			nacio not with.
An approved counterparty?	Yes	No	
Within an approved product line?	Yes	No	
Within approved authority levels?	Yes	No	
Does institution maintain written authorisation files for each trader which detail limit, product and counterparty?	Yes	No	
Does your system automatically reject any trades which are outside of the above authorities?	Yes	No	
Services: Private Banking			
Please complete this Section only	if Private Banking S	Services are offered to Clients	
How many employees are involved i	n private banking?		
Which products do they promote?			
In respect of client relationship managers: Is dual control maintained over all activities involving trades, cash or other valuables?	Yes	No	
Do you monitor suitability of procedures in respect of investment advice to clients?	Yes	No	
Do you maintain an approved list of securities?	Yes	No	
Are relationship managers allowed to deviate from this list?	Yes	No	

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If 'yes', please detail controls			
Services: Financial Service	s (Life pensions, inves	tments, insurance)	
Please complete this Section only Services, are offered to Clients	y if Financial Services comp	rising Life pensions, investn	nents, and insurance
How many people currently sell life premiums, investment and retail products?	Yes	No	
Are they all 'Approved Persons' or assessed as technically compliant persons in other jurisdictions?	Yes	No	
Please provide the revenue split	Employees		%
of the distribution of such products:	Tied agents		%
	IFAs		%
Please provide split between	Life		%
products offered:	Pensions	%	
	Investments		%
	Insurance		%
	Other		%
Do you have a procedure in place to	o monitor:		
Recurring complaints in respect to products?	Yes	No	
Recurring complaints in respect of advisor/branch?	Yes	No	
Suitability of advice?	Yes	No	
Suitability of the sales process/ channel	Yes	No	
Are all commissions /fees earned or paid to an agent /broker fully disclosed to all parties?	Yes	No	
Services: Investment Bar	nking		
Please complete this Section only	y if Investment Banking Serv	rices are offered to Clients	
Investment banking means mergers	& acquisitions, corporate adv	isory/finance, facility issuance	or corporate restructuring.
Percentage Income Split among inv	estment banking operations.		
	Income	Industry Served	% Split

M&A/Corporate Advisory
Equity – new issuance

Debt - new issuance

Equity – secondary issuance

Debt – secondary issuance

(Please provide full details on high yield offerings)			
Debt Capital Raising			%
Gross revenue derived from investment banking activities for the last three years with an estimate for current year:		Total	% Income derived from US
	20 (Estimate)	\$	
	20	\$	
	20	\$	
	20	\$	
Average fee income any one client	\$		
Largest fee income any one client			\$
Average \$ value any one transaction	١		\$
Average number of transactions any	one year		
Number of failed/incomplete transac	tions in the last year		
Please provide details on a separate	e sheet.		
Average underwriting participation to	o date		
Largest underwriting participation to	date		
Please describe the type of participation			
Total number of staff			
Partners/Directors/Principals			
Employees			
Please attach resumés.			
Are there internal guidelines in effect with respect to procedures to ensure compliance with applicable regulatory rules?	Yes	No	
Are there internal guidelines in effect with respect to procedures to ensure adequacy of due diligence reviews?	Yes	No	
Are there internal guidelines in effect with respect to procedures to ensure financial ability of buyers represented in M&A transactions?	Yes	No	
Are there internal guidelines in effect with respect to when independent outside review is required with respect to any			
investment banking transaction?	Yes	No	

Is there a secondary independent review or is there a checklist procedure conducted internally prior to the release of advice or Documentation to ensure all aspects of the transaction as agreed have been completed?	Yes	No	
Are there adequate procedures in place to ringfence sensitive information and to ensure no conflict of interests with other areas of your organization?	Yes	No	
Have you reasonable procedures in place with respect to valuation work undertaken to ensure the reasonableness of same	Yes	No	
Are specific engagement letters used?	Yes	No	
		ssuance/prospectus research report and if so how does it ensure that prospective user in forming their investing decision. Please comment	
The standard black out period			
The risk disclosures presented in both			
To whom these research reports are sent			
Are these research reports sent to US investors			
Procedures in place to ensure the accuracy and completeness of the same			
Do you have any material regulatory, internal or external recommendations outstanding or not implemented at present?	Yes	No	
If 'Yes', please provide full details.			
In the past four years has any client and/or other third party made a written complaint to the applicant or to any regulatory body or commenced any civil proceeding in connection with any transaction?	Yes	No	
If 'Yes', please provide full details.			
Has the applicant, any of its subsidia	aries or any director	r, officer, partner or trustee:	
Been charged in any civil or criminal action or administrative or regulatory proceeding with a violation of any securities law or regulation?	Yes	No	
Been charged in connection with any action or administrative or regulatory proceeding regarding allegations of market abuse?	Yes	No	

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Been charged in connection with any action or administrative or regulatory proceeding regarding "Laddering" or "Spinning" or "Conflicts or Interest" or other?

No

Yes

Yes

Yes

Yes

Yes

#### If 'Yes', please provide full details.

Has there been or is there now pending any claims against any person or entity proposed for insurance alleging, arising out of, or in connection with an investment banking transaction?

No

#### If 'Yes', please provide full details.

Does any person or entity proposed for insurance have knowledge of any act, error or omission which might give rise to a claim(s) under the proposed policy?

Yes No

#### If 'Yes', please provide full details.

It is agreed that with respect to Questions above, if such demand or claim exist or if such Knowledge, information or involvement exists, any claim or action arising there from is excluded from the proposed coverage.

#### Please attach:

Standard Investment Banking Engagement Letter. If different letters are applicable to different types of transactions, please provide a copy of each.

A list of all investment banking clients for the past three years.

#### Claims Information

# This Section to be completed by all Proposers

Is the Proposer aware, after full enquiry, of any form of client complaint (brought by the client, or on their behalf by a regulator)?

No

#### If 'Yes', please provide full details on a separate sheet.

Has any claim been brought against the Proposer or any of its directors, officers, partners, trustees or employees during the last 5 years?

No

# If 'Yes', please provide full details on a separate sheet.

Does the Proposer, after full enquiry, or any of its directors, officers, partners, trustees or employees, have any knowledge of any act, omission, event or circumstance which could give rise to a claim?

No

If 'Yes', please provide full details on a separate sheet.

## SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE.

#### Declaration

THE UNDERSIGNED AUTHORISED OFFICER/MANAGER OF THE APPLICANT DECLARES THAT THE STATEMENTS SET FORTH HEREIN ARE TRUE. THE UNDERSIGNED AUTHORIZED OFFICER/MANAGER AGREES THAT IF THE INFORMATION SUPPLIED ON THIS APPLICATION CHANGES BETWEEN THE DATE OF THIS APPLICATION AND THE EFFECTIVE DATE OF THE INSURANCE, HE/SHE (UNDERSIGNED) WILL, IN ORDER FOR THE INFORMATION TO BE ACCURATE ON THE EFFECTIVE DATE OF THE INSURANCE, IMMEDIATELY NOTIFY THE INSURER OF SUCH CHANGES, AND THE INSURER MAY WITHDRAW OR MODIFY ANY OUTSTANDING QUOTATIONS AND/OR AUTHORIZATIONS OR AGREEMENTS TO BIND THE INSURANCE

SIGNING OF THIS APPLICATION DOES NOT BIND THE APPLICANT OR THE INSURER TO COMPLETE THE INSURANCE, BUT IT IS AGREED THAT THIS APPLICATION SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED, AND IT WILL BE ATTACHED TO AND BECOME PART OF THE POLICY.

ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE INSURER IN CONJUNCTION WITH THIS APPLICATION ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE A PART HEREOF.

Please read the following statement carefully and sign where indicated. If a policy is issued, this signed statement will be attached to the policy.

The undersigned authorised officer of the Applicant hereby acknowledges that he/she is aware that the Limit of Liability contained in this policy shall be reduced, and may be completely exhausted, by the costs of legal defense and, in such event, the Insurer shall not be liable for the costs of legal defense or for the amount of any judgment or settlement to the extent that such exceeds the Limit of Liability of this policy.

The undersigned authorised officer of the Applicant hereby further acknowledges that he/she is aware that legal defense costs that are incurred shall be applied against the retention amount.

Signed	
Title (must be signed by Chairman of the Board or President)	
Company	
Date	

# Please enclose with this Proposal Form

The latest Annual Report and Accounts of the Proposer.

Copy of the standard engagement letters, or service agreement.

# Complaints

We believe you deserve courteous, fair and prompt service. If there is any occasion when our service does not meet your expectations please contact us using the appropriate contact details below and provide the Policy/Claim Number and the name of the Policyholder/Insured Person to help us deal with your comments quicker.

#### Claims related complaints:

Head of Financial Lines & Professions Claims - Claims Manager

58 Fenchurch Street, London, EC3M 4AB Telephone: +44 (0)207 063 5418 Email: claims.fl2@aig.com

Online: www.aig.com/uk (please select "contact" followed by "your feedback")

# All other complaints:

**Customer Relations Unit** 

AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG

Telephone: +44 (0) 208 649 6666 Facsimile: +44 (0) 208 680 7330

Email: uk.customer.relations@aig.com

Online: www.aig.com/uk (please select "contact" followed by "your feedback")

We will acknowledge the complaint within 5 business days of receiving it, keep you informed of progress and do our best to resolve matters to your satisfaction within 8 weeks. If we are unable to do this you may be entitled to refer the complaint to the Financial Ombudsman Service (FOS) who will review your case. We will provide full details of how to do this when we provide our final response letter addressing the issues raised.

The FOS will not consider a complaint if you:

- (i) have not provided us with the opportunity to resolve it, or
- (ii) are a business with more than 10 employees and a group annual turnover of more than €2 million; or
- (iii) are a trustee of a trust with a net asset value of more than £1 million or;
- (iv) are a charity with an annual income of more than £1 million.

The FOS can be contacted at:

Financial Ombudsman Service,

South Quay Plaza, 183 Marsh Wall, London E14 9SR

Telephone: 08000 234 567

(free for people phoning from a "fixed line", e.g. a landline at home)

Or: 0300 123 9 123

(free for mobile phone users who pay a monthly charge for calls to numbers starting 01 or 02)

Email: complaint.info@financial-ombudsman.org.uk

Following this complaint procedure does not affect your right to take legal action.

# Financial Services Compensation Scheme

The Insurer is covered by the Financial Services Compensation Scheme (FSCS). The Insured may be entitled to compensation from the scheme in the unlikely event that the Insurer cannot meet its obligations. This depends on the type of business and the circumstances of the claim. Further information is available from the FSCS.

Financial Services Compensation Scheme, 7th Floor Lloyds Chambers, Portsoken Street, London E1 8BN

Telephone: 020 7892 7300 Fax: 020 7892 7301 E-mail: enquiries@fscs.org.uk

AIG Europe Limited The AIG Building 58 Fenchurch Street London EC3M 4AB

Tel: 020 7954 7000 Fax: 020 7954 8334



# Bring on tomorrow

American International Group, Inc. (AIG) is a leading international insurance organisation serving customers in more than 130 countries and jurisdictions. AIG is the marketing name for the worldwide property-casualty, life and retirement, and general insurance operations of American International Group, Inc.

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