

Master Policy Declarations – CSID Identity Fraud Reimbursement

Policy Number: PFI 1000002

Insurer: Allianz Global Corporate & Specialty

(Interstate Fire & Casualty Company – writing company)

Policy Period: 06/01/2017 to 06/01/2018

12:01 A.M. Standard time at the address of Named Insured

Named Insured and Mailing Address:

 ${\bf CSIdentity\,Corporation,\,a\,Delaware\,Corporation\,\,and\,\,Consumerinfo.com,\,Inc.}$

1501 South Mopac Expressway, Suite 200, Austin, TX 78746

Producer Name and Address:

Wortham Insurance 221 West Sixth Street, Suite 1400, Austin, TX 78701

The insurance provided by this policy consists of the following coverage and forms. In return for payment of premium and subject to all the terms of this policy, we agree to provide the insurance as stated in this policy.

Master Policy Limit and Deductible

| Coverage | Limit of Liability Per Claim | Limit of Liability Policy Aggregate | Deductible |
|--|----------------------------------|--|--|
| Identity Fraud Expense Reimbursement | Per Subscriber Contract Terms | None | None |
| A. Fraud or Embezzlement | | | |
| B. Theft | | | |
| C. Forgery | | | |
| D. Data Breach | | | |
| E. Stolen Identity Event | | | |
| Unauthorized Electronic Fund Transfer Stolen Funds Loss | Per Subscriber Contract Terms | \$10,000,000 | \$25,000 Per Claim (Loss and Defense) |

AGCS-CSIdentity Page 1 of 2



Coverage Forms and Endorsements that are part of this Policy:

IL0017 11-98S COMMON POLICY CONDITIONS

145913 01-15 CERTIFIED ACTS OF TERRORISM EXCLUSION

386360 01-15 DISCLOSURE NOTICE REGARDING TERRORISM COVERAGE

145985 06-14 ECONOMIC OR TRADE SANCTIONS COMPLIANCE

FF-AUTH-001 10-14 AUTHORIZATION AND NOTICES AMENDATORY ENDORSEMENT

01-GE 0005 04-09 SERVICE OF SUIT

PREMIUM SUMMARY:

Estimated Annual Premium: \$ TBD

Terrorism Risk Insurance Act ("The Act") - Certified Acts Coverage - All Coverages

Subject to the Act Excl WC - Not Covered

This policy may be subject to Premium Adjustment per policy terms.

This policy is written by a surplus lines insurer and is not subject to the filing or approval requirements of the Texas Department of Insurance. Such a policy may contain conditions, limitations, exclusions and different terms than a policy issued by an insurer granted a Certificate of Authority by the Texas Department of Insurance. The insurer has been approved by the Department as an eligible surplus lines insurer, but the policy is not covered by the Texas Insurance Guaranty Fund.

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President, Interstate Fire and Casualty Company

Date of Issue: 06/01/2017

These Master Policy Declarations and other coverage Declarations, together with any common policy conditions, coverage form(s) and endorsements if any issued to form a part thereof, complete the above numbered policy.

AGCS-CSIdentity Page 2 of 2