

 PREFEITURA DO MUNICÍPIO DE SÃO PAULO SECRETARIA MUNICIPAL DA FAZENDA NOTA FISCAL ELETRÔNICA DE SERVIÇOS - NFS-e 20251008u13711169000100	Número da Nota 00064771
	Data e Hora de Emissão 08/10/2025 17:56:17
	Código de Verificação PPQ6-IZMR

PRESTADOR DE SERVIÇOS CPF/CNPJ: 13.711.169/0001-00 Inscrição Municipal: 4.300.028-2 Nome/Razão Social: 3RI VIAGENS E TURISMO LTDA Endereço: R CORONEL LUIS AMERICANO 352, : EDIFICIO METROPOLE; - VILA AZEVEDO - CEP: 03308-020 Município: São Paulo UF: SP				
TOMADOR DE SERVIÇOS Nome/Razão Social: ASSOCIACAO DA GINASTICA DE TRAMPOLIM DE CONTAGEM CPF/CNPJ: 32.026.741/0001-38 Inscrição Municipal: ---- Endereço: RUA Rua Portugal 30 - Gloria - CEP: 32340-010 Município: Contagem UF: MG E-mail: cristinatropia@gmail.com				
INTERMEDIÁRIO DE SERVIÇOS CPF/CNPJ: ---- Nome/Razão Social: ----				
DISCRIMINAÇÃO DOS SERVIÇOS Pedido 4142715 Seguro Viagem Affinity Seguro Viagem / Plano Affinity 20 Essential (Mundo sem EUA) Passageiros: JULIA EDUARDA DE JESUS ROCHA, MARIA LUIZA SALES MARCANTE, JULIA EMANUELLY DE PAULA SILVA, ANA JÚLIA FERREIRA DO AMPARO MENDES, ARTUR CARDOSO SANTOS, GABRIEL RABELO GONÇALVES LIMA, SOFIA MOUTINHO MORAIS e WALLACE SOUSA CELESTINO.				
VALOR TOTAL DO SERVIÇO = R\$ 418,08				
INSS (R\$)	IRRF (R\$)	CSLL (R\$)	COFINS (R\$)	PIS/PASEP (R\$)
-	6,27	-	-	-
Código do Serviço				
07109 - Agenciam/intermediação programas de turismo, passeios, viagens, excursões, hospedagens e congêneres				
Valor Total das Deduções (R\$)	Base de Cálculo (R\$)	Alíquota (%)	Valor do ISS (R\$)	Crédito (R\$)
0,00	418,08	5,00%	20,90	0,00
Município da Prestação do Serviço		Número Inscrição da Obra	Valor Aproximado dos Tributos / Fonte	
-		-	-	
OUTRAS INFORMAÇÕES (1) Esta NFS-e foi emitida com respaldo na Lei nº 14.097/2005; (2) Data de vencimento do ISS desta NFS-e: 10/11/2025;				

Comprovante Boleto

Valor

R\$ 418,08

Data

08/09/25

19:47

Operação realizada com sucesso!

Informações gerais

Banco recebedor
CAIXA ECONÔMICA FEDERAL

Representação numérica do código de barras
19790000053063708642941361938586411990000041808

Instituição emissora - nome do banco
STONE PAGAMENTOS S.A.

Código do banco	Código ISPB
197	16501555

Beneficiário original / Cedente

Nome fantasia
Pagar Me Pagamentos

Nome / Razão social
Pagar Me Instituicao De Pagamento S/a

CPF / CNPJ
18.727.053/0001-74

Pagador sacado

Nome / Razão social
JULIA EDUARDA DE JESUS ROCHA

CPF / CNPJ
156.438.776-35

Pagador final - Correntista

Nome / Razão social
ASSOC GIN TRAMPOLIM DE CONTAGEM

CPF / CNPJ
32.026.741/0001-38

Data de vencimento
09/09/2025

Data da Efetivação / Agendamento
08/09/2025

Valor nominal do boleto
418,08

Juros (R\$)	Desconto (R\$)
0,00	0,00
IOF (R\$)	Abatimento (R\$)
	0,00
Multa (R\$)	Valor calculado (R\$)
0,00	418,08

Identificação do pagamento
SEGURO VIAGEM

Código da operação
52358895125

Chave de segurança
9E397PMMGNCF037W

Você poderá consultar futuramente essa e outras transações no item Transações, opção "Consultas - Comprovantes".

Em caso de dúvidas entre em contato através dos nossos canais de atendimento, e informe o ID da transação presente neste comprovante.

Alô CAIXA: 4004 0104 (Capitais e reg. metropolitanas)
Alô CAIXA: 0800 104 0 104 (Demais regiões)
Pessoas com deficiência auditiva: 0800 726 2492
SAC CAIXA: 0800 726 0101
Ouvidoria: 0800 725 7474

ORÇAMENTOS SEGURO VIAGEM INTERNACIONAL – AMÉRICA DO SUL – CAMPEONATO SUL AMERICANO – preço por pessoa

Confira abaixo os 116 seguros de viagem que encontramos para você.

MENOR PREÇO

**MTA 15 Latam
+Telemedicina
Albert Einstein**

Despesas Médicas: **US\$ 15.000,00**

Extravio de Bagagem: **US\$ 400,00**

[Ver detalhes e mais coberturas](#)
[Ver outras vantagens](#)

Preço total (1 passageiro)
R\$ 60,88 à vista pix ou cartão
R\$ 64,08 até 6x sem juros

Quero esse plano →

MELHOR CUSTO x BENEFÍCIO

**ITA 60 Latam
+Telemedicina
Albert Einstein**

Despesas Médicas: **US\$ 60.000,00**

Extravio de Bagagem: **US\$ 1.250,00**

[Ver detalhes e mais coberturas](#)
[Ver outras vantagens](#)

Preço total (1 passageiro)
R\$ 69,12 à vista pix ou cartão
R\$ 72,76 até 6x sem juros

Quero esse plano →

MAIS COBERTURA

**MTA 150 Latam
+Telemedicina
Albert Einstein**

Despesas Médicas: **US\$ 150.000,00**

Extravio de Bagagem: **US\$ 1.200,00**

[Ver detalhes e mais coberturas](#)
[Ver outras vantagens](#)

Preço total (1 passageiro)
R\$ 143,67 à vista pix ou cartão
R\$ 151,23 até 6x sem juros

Quero esse plano →

Falar com Atendente

compararsegurodeviagem.com.br/?destino=americaDoSul&dataIda=20/10/2025&dataVolta=27/10/2025&email=trampolimcontagem@gmail.com&telefone=553133924872&nome=Jul...

Blog Seja um afiliado Central de Atendimento:(31) 2010-0022

Destino: América do Sul Partida: 20/10/2025 Retorno: 27/10/2025 Seguros Encontrados: 74

Filtros

Custo Benefício

SEGURO	ASSISTÊNCIA MÉDICA, EXTRAVIO DE BAGAGEM, ...	PREÇO PARA 1 PASSAGEIRO POR 8 DIAS	
Melhor Custo Benefício			
 Intermac IL30 Latam (b) + Covid (9005)	USD 30.000 USD 350 Outras Coberturas	R\$ 11,90 por dia R\$ 90,44 (-5% no pix) R\$ 95,20 (12x 7,93 s/juros)	Adquirir
	Até 64 anos		
Melhor Custo Benefício			
 Intermac IL60 Latam (b) + Covid (9009)	USD 60.000 USD 750 Outras Coberturas	R\$ 14,97 por dia R\$ 113,77 (-5% no pix) R\$ 119,76 (12x 9,98 s/juros)	Adquirir
	Até 64 anos		

PLANO 30 AM DO SUL

- ✔ Reembolso por atraso de embarque USD 100
- ✔ Despesas Odontológica USD 500
- ✔ Despesas com medicamentos USD 500
- ✔ Regresso Sanitário USD 30.000

[Veja o detalhe de sua cobertura](#)

PLANO 500

- ✓ Reembolso por atraso de embarque USD 100
- ✓ Despesas Odontológica USD 700
- ✓ Despesas com medicamentos USD 1.500
- ✓ Regresso Sanitário USD 150.000
- ✓ Traslado Médico USD 15.000

Selecione



USA:

+1 (305) 404-2116



Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: ANA JÚLIA FERREIRA DO AMPARO MENDES
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492634292-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492634292-641

TICKET

Ticket Number:	3853082	Voucher:	E2-42/492634292-641			
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025			
Effective at**:	22/09/2025	End of validity**:	29/09/2025			
Insured:	ANA JÚLIA FERREIRA DO AMPARO MENDES	CPF:	17739549622			
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA			
City:	CONTAGEM	UF:	MG	Zip code:	32340010	

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY

Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT

Prize Pool:		R\$ 15,3400	
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method		a vista	
Due Date		Periodicity	

BENEFICIARIES*

NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMDS, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
CEO
KOVRS SEGURO S.A.


Eduardo Viegas
VP Operações e Administrativo
KOVRS SEGURO S.A.



USA:

+1 (305) 404-2116



Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: ARTUR CARDOSO SANTOS
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492667783-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

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To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

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Travel Insurance Ticket - E2-42/492667783-641

TICKET

Ticket Number:	3853084	Voucher:	E2-42/492667783-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	ARTUR CARDOSO SANTOS	CPF:	15861275602		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY

Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT

Prize Pool:		R\$ 15,3400	
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method		a vista	
Due Date		Periodicity	

BENEFICIARIES*

NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMDS, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
CEO
KOVRS SEGURO S.A.


Eduardo Viegas
VP Operações e Administrativo
KOVRS SEGURO S.A.



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Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: GABRIEL RABELO GONÇALVES LIMA
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492681387-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492681387-641

TICKET					
Ticket Number:	3853086	Voucher:	E2-42/492681387-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	GABRIEL RABELO GONÇALVES LIMA	CPF:	70221547673		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY			
Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT			
Prize Pool:	R\$ 15,3400		
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method	a vista		
Due Date		Periodicity	

BENEFICIARIES*		
NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMDS, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

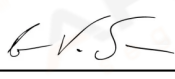
We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
CEO
KOVRS SEGURO S.A.


Eduardo Viegas
VP Operações e Administrativo
KOVRS SEGURO S.A.



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Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: JULIA EMANUELLY DE PAULA SILVA
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492615974-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492615974-641

TICKET

Ticket Number:	3853079	Voucher:		E2-42/492615974-641	
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:		10/09/2025	
Effective at**:	22/09/2025	End of validity**:		29/09/2025	
Insured:	JULIA EMANUELLY DE PAULA SILVA	CPF:		17401782626	
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:		GLÓRIA	
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY

Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT

Prize Pool:		R\$ 15,3400	
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method		a vista	
Due Date		Periodicity	

BENEFICIARIES*

NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMSSD, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

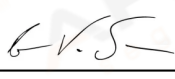
We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
CEO
KOVRS SEGURO S.A.


Eduardo Viegas
VP Operações e Administrativo
KOVRS SEGURO S.A.



USA:

+1 (305) 404-2116



Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: JULIA EDUARDA DE JESUS ROCHA
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492578837-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492578837-641

TICKET

Ticket Number:	3853075	Voucher:	E2-42/492578837-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	JULIA EDUARDA DE JESUS ROCHA	CPF:	15643877635		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY

Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT

Prize Pool:		R\$ 15,3400	
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method		a vista	
Due Date		Periodicity	

BENEFICIARIES*

NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMSSD, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

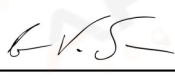
We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
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Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: MARIA LUIZA SALES MARCANTE
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492599806-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

TRAVEL INSURANCE IS NOT HEALTH INSURANCE! CHECK THE GENERAL CONDITIONS



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492599806-641

TICKET					
Ticket Number:	3853077	Voucher:	E2-42/492599806-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	MARIA LUIZA SALES MARCANTE	CPF:	70271336609		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY			
Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT			
Prize Pool:	R\$ 15,3400		
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method	a vista		
Due Date		Periodicity	

BENEFICIARIES*		
NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMSSD, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

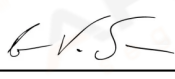
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Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
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Brazil:

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Whatsapp:

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PASSENGER DATA

HOLDER: SOFIA MOUTINHO MORAIS
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492707262-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492707262-641

TICKET					
Ticket Number:	3853088	Voucher:	E2-42/492707262-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	SOFIA MOUTINHO MORAIS	CPF:	02331415617		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY			
Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT			
Prize Pool:	R\$ 15,3400		
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method	a vista		
Due Date		Periodicity	

BENEFICIARIES*		
NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMDS, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. In this case, the exclusion only applies to the difference in the increased insured capital; The following events are also excluded: Direct or indirect, resulting from, or to which they have contributed: the use of nuclear material, ionizing radiation from contamination by the radioactivity of any nuclear fuel, or nuclear waste, resulting from the combustion of nuclear material, as well as those directly or indirectly caused by nuclear weapons, it being further understood that, for the purposes of this exclusion, the word combustion shall encompass any self-sustaining process of nuclear fusion; acts or operations of war, declared or not, chemical or bacteriological warfare, civil war, guerrilla warfare, revolution, agitation, mutiny, rebellion, revolt, sedition, uprising or other disturbances of public order or arising therefrom, strikes, mutiny, riots, lock-out, except when providing military service or acts of humanity to assist others; any type of mental illness (conditions involving pathology of psychiatric and psychological origin); medical treatments related to hemophilia or chronic dialysis; of an epidemic or pandemic declared by a competent body, except Covid, when it is diagnosed during the trip, and the insured has completed the vaccination cycle; of suicide, or attempted suicide, in the first 2 (two) years, counted from the date of the beginning of the Insurance Term; of a recognized dangerous act that is not motivated by justified need; Use of instruments of war or firearms, or participation in disputes or duels, except for the death or incapacity of the Insured when this results from the use of a riskier means of transport, the performance of military service, the practice of sports, or acts of humanity in aid of others; of damages suffered as a result of extraordinary natural phenomena, such as floods, earthquakes, volcanic eruptions, atypical cyclonic storms, hurricanes, tsunamis, falls of sidereal bodies, meteorites or any cataclysms resulting from natural disasters or public calamities; disorders and poisoning resulting from the action of chemical products or medications, except when prescribed by a doctor, as a result of a covered accident; travel in aircraft that are not approved or do not have, in force, the appropriate airworthiness certificate; in official or military aircraft in operations that are not for the simple transportation or transport of authorities or passengers; in stolen, hijacked or flown aircraft by pilots who are not legally qualified, except when providing military service or acts of humanity to assist others; directly or indirectly from a terrorist act, with the Insurer being responsible for proving with all appropriate documentation, accompanied by a report that characterizes the nature of the attack, regardless of its purpose, as long as it has been duly recognized as an attack on public order by the competent authority; hernias and their consequences, except when directly resulting from a covered personal accident; pregnancy, childbirth, abortion and any complications resulting from pregnancy, childbirth or abortion, except when directly resulting from a covered personal accident; the practice of intentional unlawful acts committed by the Insured, the Beneficiary(ies) or the legal representative of one or the other; accidents occurring while the Insured is participating in betting or street racing; accidents occurring in which the Insured, as the driver of the vehicle or equipment requiring aptitude, does not have legal qualification to do so, in accordance with the legislation of the country where the accident occurred. This insurance also does not cover: elective treatments of any nature, even if scheduled/arranged during the trip, and also any type of general medical check-up, diagnostic and routine exams; the continuation, in Brazil, of medical treatments due to accident or illness initiated abroad during the Travel Insurance Term; the continuation of medical treatments when the Emergency or Urgent clinical condition has ceased; diagnostic procedures and experimental clinical or surgical treatments, not recognized by Brazilian medical-scientific and dental societies; moral and/or aesthetic damages; any type of losses and damages, loss of profits, interruption of income and/or pension; any and all consequences resulting from death or injuries caused, directly or indirectly, by criminal or willful activities of the client, as well as those caused by acts, actions or omissions of the Insured, caused by bad faith; plastic, cosmetic or restorative surgeries, aesthetic or rejuvenating treatments and expenses with the acquisition of prosthetics and the manufacture of devices, glasses and lenses, with the exception of restorative surgeries and expenses with the repair or replacement of prosthetics damaged as a result of a covered personal accident; expenses with the replacement of natural or artificial teeth, except if dental expenses coverage is contracted; injuries resulting from the practice of amateur or professional sports, except if Additional Coverage of Medical, Hospital and Dental Expenses for the Practice of Sports is contracted; injuries and damages suffered as a result of participation in trips or excursions to unexplored areas; all services originating from the completion of courses, technical training and/or prior technical training for the development of sports considered high-risk or extreme sports. accidents, illnesses and any effect produced as a result of participating in tests of aircraft, automobiles or other mechanically propelled vehicles, underwater trips, use of aircraft including helicopters, except in the case of a passenger on a paid flight using a company authorized to transport passengers, or a helicopter operating only between commercial airports or heliports and authorized to transport paying passengers; events occurring in transport not licensed or authorized by the competent authority; expenses with funeral, urn or funeral ceremony, except for the reimbursement of expenses with the funeral of minors under 14 (fourteen) years of age, or if Funeral Coverage is contracted; rescue at sea, mountains and uninhabited areas or in countries in a state of declared war or notorious political instability, which poses a risk to the life and health of its population and of foreigners entering the country; repatriation in an ICU plane or regular Airline, if, at the discretion of the client's medical team, the client can be treated locally and there is no impediment to continuing the trip; expenses for companions related to telephone calls, minibar and any expenses with extraordinary expenses during the Insured's hospital stay; expenses for consultations aimed at administering vaccines, all nursing practices, such as application, monitoring, nebulizations, drainages, dressings, glucose control, unless resulting from medical recommendation due to Personal Accident, sudden and acute illness or clinical condition of Emergency or Urgency; damages suffered as a result of acts or activities of the Armed Forces or Security Forces in times of peace; medical, surgical, pharmaceutical, dental and hospitalization expenses incurred or prescribed in Brazil before the start of the trip, including consultations to obtain medical prescriptions for the prescription of chronically taken medications such as, for example, antihypertensives (medicines for high blood pressure), oral hypoglycemic agents (medicines for diabetes), among others; Any type of expenses with taxis, transportation applications, car rentals and any other means of private transportation, regardless of the purpose.

3. PRIZE

The premium paid to the Insurance Representative is deemed to be made by the Insurer. Failure to pay the first installment by the due date will result in the cancellation of the policy. The payment of the insurance premium in installments will not imply its full discharge, if all installments have not been paid. If the claim occurs within the deadline for payment of the cash premium, without payment having been made, the right to compensation will not be impaired.

4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

6. ADDITIONAL INFORMATION

Contracting Insurance is optional. The client will be able to consult the registration status of his insurance broker, on the website www.susep.gov.br, through his registration with SUSEP, full name or CNPJ/CPF. The registration of this plan with SUSEP does not imply, on the part of the Autarchy, an incentive or recommendation for its commercialization. SUSEP Customer Service 0800-0218484. The contractual conditions of this product filed by the company with SUSEP can be consulted at the electronic address www.susep.gov.br according to the process number contained in the Insurance Ticket. Rates of 0.65% of PIS/Pasep and 4% of COFINS are levied on insurance premiums, deducted from the establishment in specific legislation.

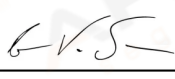
We emphasize that, according to CNSP Resolution 382/2020, the proponent must be informed of the information related to the product and remuneration before its acquisition.

KOVR undertakes to process personal data accessed as a result of procedures prior to this contract, as well as during its execution and after its termination, in accordance with the legislation relating to the protection of personal data, in particular, but not limited to, Law No. 13,709/2018, the General Data Protection Law ("LGPD") and the provisions of the Privacy and Personal Data Protection Policy available at [Kovr | Privacy Policy](#).

Link to the official digital platform for registering consumer complaints from supervised markets: www.consumidor.gov.br.

Signature of the Insured


Thiago Leão de Moura
CEO
KOVRS SEGURO S.A.


Eduardo Viegas
VP Operações e Administrativo
KOVRS SEGURO S.A.



USA:

+1 (305) 404-2116



Spain:

+34 (91) 946-4328



Brazil:

+55 (11) 3042-7737



Whatsapp:

+1 (305) 404-2116



PASSENGER DATA

HOLDER: WALLACE SOUSA CELESTINO
PLAN: 641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)
TRIP PERIOD: 22/09/2025 - 29/09/2025
PRICE IN US\$: \$: 16.69
AMOUNT TO PAY: R\$: 90.8

VOUCHER N°: E2-42/492736911-641
DESTINY: AMÉRICA DO SUL
DATE OF ISSUE: 10/09/2025
EXCHANGE RATE: 5,44

This is your **Assistance Voucher**, in case of emergency, call our **24-hour Customer Service Center**. Prior communication with the Affinity Call Center is essential to ensure coverage of the contracted services.

**TRAVEL INSURANCE IS NOT HEALTH INSURANCE!
CHECK THE GENERAL CONDITIONS**



To make the most of all the benefits, **read the GENERAL CONDITIONS carefully**. You will find important information about coverage, contracted limits and procedures for requesting reimbursement.

Your safety is our priority! In case of emergency, contact the Affinity Call Center, which will guide your assistance.

To contact the 24-hour Call Center, call the corresponding number and provide your name, **insurance ticket number or voucher number, passport, location and the service you require**.

To contact the 24-hour Call Center via **WhatsApp**, use text messages only. We do not provide voice call service through this channel.

falecom@affinityseguro.com.br

CONTRACTED 24-HOUR ASSISTANCE SERVICES

Telemedicine	YES
Communication services for assistance coordination	YES
Coordination for indication of the provider of national and international medical, hospital and dental services	YES
Transmission of urgent messages	YES
Guidance in case of document loss	YES
Coordination of legal assistance services in case of traffic accident	YES
Coordination of urgency transfers	YES

ATTENTION: If the Medical Center requests a billing address for service coordinated by our 24-hour Call Center, please provide the details of our **Operations Center: 800 SE 4th Ave, Suite 718, Hallandale Beach FL 33009, USA**

ATTENTION

THE ACQUISITION OF AFFINITY'S INSURANCE TICKET SIGNIFIES FULL ACCEPTANCE AND ADHERENCE TO OUR STIPULATED TERMS AND CONDITIONS, AVAILABLE AT THE FOLLOWING LINK: [GENERAL CONDITIONS WEBSITE](#).



Travel Insurance Ticket - E2-42/492736911-641

TICKET					
Ticket Number:	3853091	Voucher:	E2-42/492736911-641		
Plan:	641-AFF 20 ESSENTIAL (EXCETO AM. DO NORTE)	Date of Issue:	10/09/2025		
Effective at**:	22/09/2025	End of validity**:	29/09/2025		
Insured:	WALLACE SOUSA CELESTINO	CPF:	14786162612		
Address:	RUA PORTUGAL 30 - CSU ELDORADO, 0	Neighborhood:	GLÓRIA		
City:	CONTAGEM	UF:	MG	Zip code:	32340010

COVERAGE	CAPITAL	AWARD WITH IOF
Medical and hospital expenses in travelling by Event	Up to 20.000	R\$ 14.573
Medical and hospital expenses for COVID 19 in travel	Yes	R\$ 0
Medical expenses in case of chronic or preexisting illness emergency and urgency	Yes	R\$ 0
Medical expenses for sports	Yes	R\$ 0
Expense dental	Yes	R\$ 0
Pharmaceutical expenses	Up to 200	R\$ 0.0153
Health return	Up to 18.000	R\$ 0.0153
Body transfer	Up to 18.000	R\$ 0.0153
Medical transfer	Up to 1.000	R\$ 0.0153
Refund for late flight for more than 12 hours	Not covered	R\$ 0
Baggage Delay	Not covered	R\$ 0
Travel cancellation/interruption	Up to 300	R\$ 0.3682
Lost luggage	Up to 300	R\$ 0.0153
Total/partial permanent disability by accident in travel	5.000	R\$ 0.0153
Accidental death in travel	5.000	R\$ 0.0153
Medical expenses for pregnant up to 32 ^a weeks	Yes	R\$ 0
Legal assistance	Up to 5.000	R\$ 0.0153

Observation: For **Essential** Line plans, the insured capital will be denominated **EURO(EUR)** in **European countries**, and **DOLLARS(USD)** in **all other countries**, except Brazil.

INSURANCE COMPANY			
Insurance Company:	KOVR SEGURADORA S.A	CNPJ:	42.366.302/0001-28
Group:	13	Branch:	1369-SEGURO VIAGEM
SUSEP Process:	15414.652264/2024-34	Susep Code:	6921
SUSEP Registration:	202109002		
Representative:	ASPAS TURISMO, VIAGENS E ASSISTENCIA INTERNACIONAL S/A	CNPJ:	17.846.647/0001-31
Broker:	SAMY HAZAN CONSULTORIA & CORRETAGEM DE SEGUROS LTDA	CNPJ:	33.700.772/0001-95
Broker:	PRELUDIO CORRETORA DE SEGUROS LTDA	CNPJ:	12.159.384/0001-79

PAYMENT			
Prize Pool:	R\$ 15,3400		
IOF (0,38%):	R\$ 0,06	Net Prize:	R\$ 15,28
Percentage of remuneration:	0,01%	Amount of remuneration:	R\$ 0,0015
Payment Method	a vista		
Due Date		Periodicity	

BENEFICIARIES*		
NAME	PARTICIPATION (%)	DEGREE OF KINSHIP

*In the absence of designation of beneficiaries, or if for any reason the one made does not prevail, the indemnity will be paid in accordance with the legislation in force.

**The insurance will start at 24h on said day, and the same applies to the coverages.

PLEASE NOTE: TRAVEL INSURANCE IS NOT HEALTH INSURANCE! READ THE CONTRACTUAL CONDITIONS CAREFULLY, NOTING YOUR RIGHTS AND OBLIGATIONS, AS WELL AS THE LIMIT OF THE INSURED CAPITAL CONTRACTED FOR EACH COVERAGE.

Travel Insurance Ticket

This document is a complement to the attached Insurance Ticket

1. OBJECTIVE

The purpose of this insurance is to guarantee the insured or his/her beneficiaries, during the previously determined travel period, the payment of an indemnity, limited to the contracted insured capital, in the form of payment of the contracted amount or reimbursement, or even the provision of services, in the event of the occurrence of risks foreseen and covered by the coverage contracted and indicated in the Insurance Ticket, **as long as the event does not qualify as "excluded risks" or "not covered" by current legislation.**

2. EXCLUDED RISKS

The following are excluded from the concept of "personal accident": Diseases, including occupational diseases, whatever their causes, even if caused, triggered or aggravated, directly or indirectly by accident, except for infections, septicemic states and embolisms, resulting from visible injury caused as a result of a covered accident; Complications or complications resulting from examinations, clinical or surgical treatments, when not resulting from a covered accident; Injuries resulting from, dependent on, predisposed to or facilitated by repetitive strain or cumulative micro traumas, or that have a cause and effect relationship with them, as well as injuries classified as: Repetitive Strain Injury – RSI, Work-Related Musculoskeletal Diseases – WMDS, Injury by Continuous or Continuous Trauma – LTC, or similar that may be accepted by the medical-scientific class, as well as its post-treatment consequences, including surgical, at any time; Situations recognized by official social security institutions or similar, such as "accident disability", in which the event causing the injury does not fully fit into the characterization of disability due to personal accident.

Unless otherwise stipulated expressly in the general conditions of this insurance ticket, the following are excluded from this insurance contract: The beneficiary is not entitled to the stipulated capital when the insured commits suicide in the first two years of the initial term of the contract, or its renewal after it has been suspended, in accordance with article 798 of the Civil Code and counting: the beginning of the individual validity of the insurance; or the request for an increase in the insured capital made exclusively by the insured. 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3. PRIZE

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4. RIGHT OF WITHDRAWAL

The Insured may withdraw from the contracted insurance, provided that it is prior to the trip, within 7 (seven) calendar days from the date of issuance of the Ticket or the effective payment of the premium, whichever occurs later. If the Insured exercises the right of withdrawal, any amounts paid, for any reason, during the period referred to in the item, will be returned immediately. The Insured may exercise his/her right of withdrawal by the same means used for contracting, without prejudice to other means made available.

5. CLAIMS

The customer holding this Ticket will receive all the information to activate their Insurance, including the list of mandatory documents, by calling the Call Center via WhatsApp + 55 (11) 3181-7696. The Insurer will have a period of 30 (thirty) days from the delivery of all required documentation to pay the compensation due. In the event of a request for additional documentation, which is made available only once to the Insurer in the event of a justifiable doubt, this period will be suspended and will start running again on the business day following the day on which the requirements are fully met. The insured must present the documents required for payment of the compensation, according to the instructions received when contacting the Call Center.

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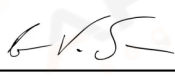
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Signature of the Insured


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