

June 14, 2021

To Whom It May Concern:

Insurance Company: Starr Indemnity & Liability Company
Policyholder: Erickson Incorporated
Policy Number: BTAI 273361
Insurance Period: 07/19/2018 – 06/30/2024

This is to certify that _____ (employee name) traveling on behalf of the policyholder, is covered while traveling under the terms of the insurance policy number above. This policy does include coverage for COVID-19 should the employee become ill while traveling and need to seek treatment.

Coverage is provided on a 24-hour basis for the duration of the trip.

- Emergency Medical Evacuation – actual cost
- Repatriation of Remains – actual cost
- Emergency Sickness and Injury Medical and Hospitalization Expenses (including Dental) for travel outside the insured person's home country or country of permanent assignment – \$250,000

Deductible: \$0
Coinsurance: 100%

While the insured person is traveling abroad, they are insured for the benefits outlined above. Insurance of this letter is not a guarantee of payment. All claims submitted will be reviewed separately.

If you have any questions, I can be reached at (541) 281-7050 or Kristi.Gonzalez@EricksonInc.com.

Sincerely,



Kristi Gonzalez
VP of People