




# I'M IN THE DARK!



American Bank &  
American State Bank  
Member FDIC

## A TOTAL SOLAR ECLIPSE MYSTERY

April 5-10, 2024



We're heading somewhere interesting on this five-night mystery tour to an out-of-state locale! We're keeping you in the dark except to say we will be in the dark during a total solar eclipse! As for the rest of the itinerary, "it's that one place with the one thing in that one town!" At departure you'll receive a clue on what direction we are heading and maybe even the state (if we're feeling generous). Clues will be given along the way to keep you guessing. Just expect the unexpected and get ready to open your eyes to amazing experiences and destinations you might otherwise have overlooked!

### TERMS & CONDITIONS

For full tour terms and conditions, please visit [www.stardestinations.com/terms-american-mystery](http://www.stardestinations.com/terms-american-mystery)

## INCLUSIONS

- Private motorcoach transportation
- 5 nights' accommodations
- 13 meals (5 breakfasts, 3 lunches, 5 dinners)
- Admission to attractions as stated on itinerary
- Porter service of one bag per person at hotels (if available)
- Taxes and gratuities for included services

### Not included in the price of this tour:

Meals/beverages other than those listed on the itinerary, beverages other than tea/coffee/water with included meals, items of a personal nature/souvenirs, phone calls and faxes from hotels, travel protection plan, fees related to any COVID-19 requirements for this destination, and any service not listed in the above inclusions.

### Activity Level: Minimal to Moderate

In order to participate in this tour, **you must:**

- Be able to walk/stand 2-3 hours at a time at an easy pace in all weather conditions
- Be able to maneuver some stairs, inclines, and uneven surfaces without assistance

For further information or questions, please contact:

**Loreen Marra, American Spirit Club Coordinator**  
**American State Bank**  
**525 N Main Ave, Sioux Center, IA 51250**  
**(712) 722-4846 or (866) 938-4846**

## TOUR PRICING

**\$1,599 per person, double**

**\$1,955 per person, single**

## OPTIONAL TRAVEL PROTECTION

**American Bank and American State Bank RECOMMEND all travelers purchase a Travel Protection Plan. For your convenience, we offer a travel protection plan provided by Traveler Insurance Services.**

See the included Traveler Insurance Services flyer for pricing.

(Payment may be sent with your deposit or with final payment to American State Bank)

A Travel Protection Plan may be purchased any time before or with final payment to American State Bank.

Travel Insurance is underwritten by Zurich American Insurance Company, (NAIC #16535). Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. To view state specific fraud warnings, visit: <https://www.travelersinsurance.com/company/fraud-warning>. Traveler Insurance Services Inc. ("Traveler Insurance") maintains an updated list of alerts and financial defaults on its website available at <https://www.travelersinsurance.com/customer-service/travel-alerts/travel-supplier>.

Traveler Insurance Services, Inc. CA Agency License #0D10209. Insurance coverages underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company (NAIC # 16535).

**A \$250 deposit per person is required with your registration form in order to reserve your spot:**

**FINAL PAYMENT IS DUE:  
FEBRUARY 5, 2024**



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American Bank &  
American State Bank  
Member FDIC

Travel arrangements  
provided by



**April 5-10, 2024**

## PASSENGER INFORMATION (1st Traveler)

(Name must be written here as it appears on your government-issued ID)

First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

## PASSENGER INFORMATION (2nd Traveler)

(Name must be written here as it appears on your government-issued ID)

First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

**American Bank and American State Bank RECOMMEND all travelers purchase a Travel Protection Plan. For your convenience, we offer a Travel Protection Plan provided by Traveler Insurance Services.**

- ☐ **Yes, I would like to purchase the offered plan.**  
See the included Traveler Insurance Services flyer for pricing.  
(Payment may be sent with your deposit or with final payment to American State Bank)
- ☐ **No, I decline the offered plan.**

**Tour Cost: per person, Double: \$1,599 Single: \$1,955**

Travel Insurance is underwritten by Zurich American Insurance Company, (NAIC #16535). Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. To view state specific fraud warnings, visit: <https://www.travelersinsurance.com/company/fraud-warning>. Traveler Insurance Services Inc. ("Traveler Insurance") maintains an updated list of alerts and financial defaults on its website available at <https://www.travelersinsurance.com/customer-service/travel-alerts/travel-supplier>.

Traveler Insurance Services, Inc. CA Agency License #0D10209. Insurance coverages underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company (NAIC # 16535).

Sleeping Preference (circle one): Two Beds One Bed

Roommate (name): \_\_\_\_\_

**For further information or questions, please contact:**

**Loreen Marra**

**American Spirit Club Coordinator  
American State Bank**

**525 N Main Ave, Sioux Center, IA 51250  
(712) 722-4846 or (866) 938-4846**

**\* A Travel Protection Plan may be purchased any time before or with final payment to American State Bank \***

PLEASE TURN OVER FOR SIGNATURE

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**DOCUMENTATION:** A current government-issued photo ID is required for this trip.

**OPTIONAL TRAVEL PROTECTION PLAN:** American Bank and American State Bank recommends that you purchase a Travel Protection Plan to help protect you and your travel investment against the unexpected so you can relax and enjoy your trip. Participants may purchase this coverage from the provider of your choice. For your convenience, we offer a Travel Protection Plan, 360° Group Premier provided by Travelex Insurance Services, that helps provide coverage for trip cancellation/interruption, trip delay, baggage loss, theft or damage, medical expense and emergency evacuation coverage, and more. For more information, please see the product flyer included with this brochure. If you would like to purchase the offered plan, please check the applicable box on the registration form. Please Note: The plan cannot be purchased after final payment. To view/download the Policy, which provides the full coverage terms and details, including limitations and exclusions, go to: <https://policy.travelexinsurance.com/GPZ-1023>. To view state specific fraud warnings, visit: <https://www.travelexinsurance.com/company/fraud-warning>. The purchase of this product is not required in order to purchase any other travel product or service. Your travel retailer might not be licensed to sell travel insurance and will only be able to provide general information about the product. An unlicensed travel retailer may not answer questions about the terms and conditions of the insurance offered and may not evaluate the adequacy of your existing insurance coverage. The products being offered provide insurance coverage that only applies during your covered trip. You may have insurance coverage from other sources that provide similar benefits but may be subject to different restrictions depending upon the coverage. You may wish to compare the terms of the travel policy offered through Travelex with any existing life, health, home, and automobile insurance policies you may have. If you have questions about your coverage under your existing insurance policies, contact your insurer or insurance agent or broker. Travelex Insurance Services, Inc. CA Agency License #0D10209. Travel Insurance is offered on behalf of and under the direction of Travelex Insurance Services. Insurance coverages underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company (NAIC # 16535).

**CANCELLATION:** Full refund of all monies is made if cancellation is received in writing to American Bank and American State Bank prior to final payment. A 100% fee is charged if the cancellation occurs between final payment and departure. If the reason for cancellation is due to a medical or other reason that is covered by Travel Protection, you may be eligible for reimbursement for such fees from your Travel Protection Plan provider.

**TRAVELERS WITH SPECIAL NEEDS:** You must advise Star Destinations, Inc. (SDI) at the time of registration of any disability requiring special attention. SDI will make reasonable efforts to accommodate the special needs of travelers. The Americans with Disabilities Act is applicable only in the U.S., and accommodations outside the U.S. may be more limited. Travelers requiring assistance are required to be accompanied by a companion who is capable of, and totally responsible for, providing the assistance. Neither SDI personnel nor its suppliers may lift or physically assist with travelers' special needs including, but not limited to, walking, dining, or other routine activities. Travelers thinking they may need assistance should call SDI to determine what accommodations may reasonably be provided. Arrangements at an additional cost are the financial responsibility of the traveler.

**TERMS & CONDITIONS:** Star Destinations, Inc. (SDI) acts as an agent for suppliers such as airlines, hotels or activities to provide you with the travel services and accommodations. Although great care is taken in choosing suppliers, we are unable to control them and therefore cannot be held responsible or liable for their acts or omissions. Should a contracted supplier be unable to perform required services, SDI reserves the right to substitute advertised services with similar services. SDI is not responsible for any claims, losses, damages, costs or expenses arising out of injury, accident or death, damage, loss, trip delay or delay of baggage, or other inconvenience resulting from mechanical breakdowns, fire, theft, civil disturbances, government actions, weather, and other factors beyond our control. In the case of a pandemic or worldwide disturbance that interrupts or cancels your planned tour, SDI will do everything possible to retrieve any refundable components of your tour but cannot be held responsible for any non-refundable portions of the tour. In addition, SDI reserves the right to vary the tour price advertised or printed to cover any increase in air fare, volatile fuel prices, government taxes and charges, exchange rate fluctuations, or other tour-related tariffs or newly announced travel costs. In the current travel environment, pricing may be increased due to unexpected requirements for health and safety of tour members. Due to infectious diseases, including COVID-19, destination areas may implement restrictions and requirements that may add additional costs beyond our control. Be aware that any public interaction carries a risk of exposure to infectious diseases. Travelers assume personal risk upon tour registration, and SDI cannot be held responsible in the event of infectious disease exposure. If you request a variation or change to your booking, SDI may choose to accept or reject that request. If accepted, you are responsible for any fees associated with it. If the minimum number of passengers required to operate the tour is not met, SDI reserves the right to cancel the tour.

It is the sole discretion of SDI to refuse transport to any passenger, or require any passenger to leave the tour, if it is reasonably believed that the passenger (1) is dangerous to others or to himself or herself; (2) is engaged in, or is threatening to engage in behavior that may adversely affect the safety, security, enjoyment, or well-being of other passengers, including behavior that is disruptive, verbally or physically abusive, obnoxious, harassing, or obscene; or (3) has failed or refused to follow SDI's rules and procedures or the instructions of its representatives. In the event a passenger is removed, such passenger may be left at any location without any liability to SDI or its representatives. SDI shall not be required to refund any portion of the price paid by any passenger who is removed, nor shall SDI be responsible for any further expenses incurred by the passenger. SDI shall be entitled to recover from the passenger any costs or expenses incurred by SDI or its representatives in the removal of the passenger or the exercise or enforcement of this clause.

**A \$250 deposit per person is required with your registration form in order to reserve your spot.**

**FINAL PAYMENT IS DUE: FEBRUARY 5, 2024**

**DEPOSIT PAYMENT INFORMATION:**

Enclosed is my check, payable to: American State Bank

In the amount of: \_\_\_\_\_

Mail Check to: American State Bank  
525 N Main Ave, Sioux Center, IA 51250

By registering for this tour and signing below, **you acknowledge that American Bank and American State Bank reserve the right to refuse transport at any time to any passenger who does not meet the activity level requirements below.** Neither American Bank, American State Bank, nor Star Destinations will be required to refund any portion of the price paid by any passenger who is removed in enforcement of this clause.

**Activity Level: Minimal to Moderate**

In order to participate in this tour, **you must:**

- Be able to walk/stand 2-3 hours at a time at an easy pace in all weather conditions
- Be able to maneuver some stairs, inclines, and uneven surfaces without assistance

Signature (1st Traveler): \_\_\_\_\_

Date: \_\_\_\_\_

Please initial to indicate you have read/agree to the terms and conditions: \_\_\_\_\_

Signature (2nd Traveler): \_\_\_\_\_

Date: \_\_\_\_\_

Please initial to indicate you have read/agree to the terms and conditions: \_\_\_\_\_

*By registering for this trip, I agree to grant to Star Destinations and its authorized representatives permission to record on photography film and/or video, pictures of my participation. I further agree that any or all of the material photographed may be used, in any form, as part of any future publications, brochure, or other printed or digital materials used to promote Star Destinations, and further that such use shall be without payment of fees, royalties, special credit or other compensation.*



Group tours are an exciting way to explore the world, and a Travelex travel protection plan can help ensure that you stay safe during your next tour. Our 360° Group Premier plan provides maximum travel protection for all ages at competitive group rates. Benefits include trip cancellation and interruption, emergency medical coverage, and 24/7 travel assistance services.



## 360° Group Premier | Group Travel Protection

### Plan highlights

- Trip cancellation/interruption benefit includes:
  - Sickness, injury, or death<sup>1</sup>
  - Inclement weather & natural disasters
  - Financial insolvency<sup>2</sup> & labor strike
  - Involuntary unemployment
- Primary coverage, no deductibles<sup>3</sup>
- Medical evacuation
- 5-hour travel delay benefit
- 3-hour missed connection benefit
- 12-hour baggage delay benefit
- Fast online claims<sup>4</sup>

### 360° Group Premier plan rates<sup>3</sup>

Trip cost	0-59	60-74	75+
\$0	\$36	\$47	\$64
\$1 - \$250	\$44	\$58	\$81
\$251 - \$500	\$57	\$74	\$105
\$501 - \$1,000	\$86	\$114	\$168
\$1,001 - \$1,500	\$109	\$143	\$211
\$1,501 - \$2,000	\$149	\$191	\$215
\$2,001 - \$2,500	\$191	\$245	\$277
\$2,501 - \$3,000	\$234	\$300	\$338
\$3,001 - \$3,500	\$276	\$354	\$400
\$3,501 - \$4,000	\$319	\$409	\$461
\$4,001 - \$4,500	\$361	\$463	\$523
\$4,501 - \$5,000	\$404	\$518	\$584
\$5,001 - \$5,500	\$446	\$572	\$646
\$5,501 - \$6,000	\$489	\$627	\$707
\$6,001 - \$6,500	\$531	\$681	\$769
\$6,501 - \$7,000	\$574	\$736	\$830
\$7,001 - \$8,000	\$638	\$818	\$923
\$8,001 - \$9,000	\$723	\$927	\$1,046
\$9,001 - \$10,000	\$808	\$1,036	\$1,169
\$10,001 - \$11,000	\$893	\$1,145	\$1,292
\$11,001 - \$12,000	\$978	\$1,254	\$1,415
\$12,001 - \$13,000	\$1,063	\$1,363	\$1,538
\$13,001 - \$14,000	\$1,148	\$1,472	\$1,661
\$14,001 - \$15,000	\$1,233	\$1,581	\$1,784
\$15,001 - \$16,000	\$1,318	\$1,690	\$1,907
\$16,001 - \$17,000	\$1,403	\$1,799	\$2,030
\$17,001 - \$18,000	\$1,488	\$1,908	\$2,153
\$18,001 - \$19,000	\$1,573	\$2,017	\$2,276
\$19,001 - \$20,000	\$1,658	\$2,126	\$2,399

### 360° Group Premier plan benefits<sup>3</sup>

Benefits	Coverage
Trip cancellation	100% of trip cost (up to \$20,000)
Trip interruption	150% of trip cost (up to \$30,000)
Trip interruption—return air only <sup>5</sup>	\$1,000
Travel delay	\$1,000 (\$250/day)
Missed connection	\$1,000
Baggage & personal effects	\$1,500
Sporting equipment delay <sup>3</sup>	\$600
Baggage delay	\$250
Emergency medical expenses <sup>6</sup>	\$50,000
Emergency dental expenses <sup>6</sup>	\$500
Emergency evacuation & repatriation	\$250,000
Accidental death & dismemberment	\$10,000
Travel assistance services <sup>7</sup>	Included

<sup>1</sup>Of you, a traveling companion, family member, or business partner. <sup>2</sup>Coverage when plan is purchased at or before the final trip payment. <sup>3</sup>All coverage per insured up to the limits listed. Pre-existing medical conditions waiver may vary by state. Coverages may vary and may not be available in all states. Please see the policy for details, or call +1.888.574.7026. Rates are subject to change. <sup>4</sup>Based on industry average. Fastest payment on approved claims is based on electronic payment of claim. <sup>5</sup>Coverage for trip interruption and trip interruption—return air only cannot be combined. <sup>6</sup>\$50 deductible in CT, IN, KS, MO, MT, VT, and WA. <sup>7</sup>Provided by the designated provider listed in the policy. 10.23 GRPFLY3







## Questions about plan benefits?

Call +1.888.574.7026 and use Plan GPZ-1023, or email [360Group@travelexinsurance.com](mailto:360Group@travelexinsurance.com).

### Trip cancellation & trip interruption

Protect travel investments and recover nonrefundable prepaid costs if your trip is canceled or interrupted for a covered reason. Popular covered reasons include:

- Sickness, injury, or death<sup>1</sup>
- Residence or destination uninhabitable
- Strike
- Inclement weather
- Cancel for business reasons
- Traffic accident en route
- Quarantine
- Jury duty/subpoena
- Military duty
- Financial insolvency<sup>2</sup>
- Terrorist incident
- Theft of passport/visa
- Involuntary termination

### Travel delay

Reimbursement for reasonable additional costs — such as accommodations, local transportation, and meals — if travel is delayed five hours or longer.

### Baggage & personal effects

Reimbursement for personal articles and expenses if bags are lost, stolen, or damaged.

### Baggage delay

Reimbursement for reasonable additional personal articles and expenses if bags are delayed for 12 hours or more.

### Emergency medical & dental expenses<sup>6</sup>

Emergency medical treatment if sickness or injury occurs while traveling.

### Emergency medical evacuation

Includes emergency medical evacuation to the nearest suitable medical facility, help returning home if medically necessary, and repatriation expenses.

### Accidental death & dismemberment

Reimbursement for permanent loss of life, limbs, or sight from a covered accidental injury during travel.

### Pre-existing medical condition exclusion waiver<sup>3</sup>

Pre-existing medical conditions are eligible for coverage when:

- The traveler is medically able to travel at the time of plan purchase
- The plan is purchased at or before the final trip payment

A pre-existing condition is an injury, sickness, or other condition (excluding any condition from which death ensues) of an insured, traveling companion, or family member traveling with the insured within the 60-day period immediately preceding the insured's plan purchase date.

### Plan details

View policy at [policy.travelexinsurance.com/GPZ-1023](http://policy.travelexinsurance.com/GPZ-1023)

**STAR DESTINATIONS**  
**LOCATION NUMBER: 15-0153**

Unless otherwise stated in the plan, this plan will not pay for any loss arising directly or indirectly out of, or as a result of, or from, or that occur to, or are as a result of the actions of, the insured or the insured's family member, or traveling companion, or business partner for the following: suicide, attempted suicide, or intentionally self-inflicted injury, while sane or insane (while sane in CO and MO); mental, nervous, or psychological disorders; being under the influence of drugs or intoxicants, unless prescribed by a physician; normal pregnancy, resulting childbirth, and elective abortion; participation as a professional in athletics while on a covered trip; participation in organized amateur or interscholastic athletic or sports competition or related practice events; riding or driving in any motor competition; off-road driving, whether as a driver or as a passenger; declared or undeclared war, or any act of war; civil disorder; service in the armed forces of any country; nuclear reaction, radiation or radioactive contamination; operating or learning to operate any aircraft, as pilot or crew; mountain climbing, bungee jumping, snow skiing, skydiving, parachuting, free falling, cliff diving, B.A.S.E. or base jumping, hang gliding, parasailing, travel on any air-supported device other than on a regularly scheduled airline or air charter company, or extreme sports; mountaineering where ropes or guides are commonly used including ascending and descending a mountain requiring specialized equipment, including but not limited to anchors, bolts, carabiners, crampons, lead/top-rope anchoring equipment and pick-axes; scuba diving if the depth of the water exceeds 75 feet; the insured's commission of or attempt to commit a felony; elective medical or holistic treatment or procedures; failure of any tour operator, common carrier, other travel supplier, person or agency to provide the bargained-for travel arrangements/services; a loss that results from a sickness, disease, or other condition, event, or circumstance that occurs at a time when this policy is not in effect for the insured; a diagnosed sickness (if insurance is purchased after such diagnosis) from which no recovery is expected and that only palliative treatment is provided and that carries a prognosis of death within 12 months of the effective date of the applicable coverage under this policy; sickness, injury or death if the plan is purchased after entering a hospice facility or receiving hospice treatment; any trip taken outside the advice of a physician; or a pre-existing medical condition, including death, that results therefrom (within the stated look-back period within your insurance policy). Additionally, this plan will not pay for any loss arising directly or indirectly out of, or as a result of, or from, or that occur to, or are as a result of the actions of, the following that occur to the insured: any amount paid or payable under any worker's compensation, disability benefit or similar law; a loss or damage caused by detention, confiscation, or destruction by customs; or medical treatment during a covered trip, or arising from a covered trip undertaken for the purpose or intent of securing medical treatment. The following additional exclusion applies to accidental death and dismemberment benefits: We will not pay for loss caused by or resulting from sickness of any kind. Please refer to your plan documents for a complete list of plan exclusions and limitations, as well as the definitions of capitalized terms used herein. The purchase of this product is not required in order to purchase any other travel product or service. Your travel retailer might not be licensed to sell travel insurance and will only be able to provide general information about the product. An unlicensed travel retailer may not answer questions about the terms and conditions of the insurance offered and may not evaluate the adequacy of your existing insurance coverage. The products offered provide insurance coverage that only applies during your covered trip. You may have insurance coverage from other sources that provide similar benefits but may be subject to different restrictions depending on the coverage. You may wish to compare the terms of the travel policy offered through Travelex with any existing life, health, home, and automobile insurance policies you may have. If you have questions about your coverage under your existing insurance policies, contact your insurer or insurance agent or broker. Any inquiry regarding claims may be directed to Zurich Travel Assist at [claims@zurichtravelassist.com](mailto:claims@zurichtravelassist.com), P.O. Box 968019, Schaumburg, IL 60196-8019; +1.800.501.4781. Inquiries regarding new, existing, or denied claims and any other claims questions may also be directed to this address. Consumers in California may also contact the California Department of Insurance Hotline +1.800.927.4357 or +1.213.897.8921. Travelex Insurance Services, Inc. CA Agency License #0D10209. Consumers in Maryland may contact the Maryland Insurance Administration +1.800.492.6116 or +1.410.468.2340. Insurance coverages underwritten by Zurich American Insurance Company, a New York domiciled company with its principal place of business at 1299 Zurich Way, Schaumburg, IL 60196 (NAIC # 16535). The terms and conditions of the policy described in this brief summary are governed by the individual policy document that contains the complete terms. In the event of any discrepancy between the information in this brief summary and the policy, the policy document shall govern. This is intended as a general description of certain types of insurance available to qualified customers, provided solely for informational purposes. Policy Form Series #U-TIIV-100-A CW, #U-TIIN-100/110-A CW, #U-TIGV-100-A CW, #U-TIGV-100-A DC, #U-TIGV-100-A DC; in IN #U-TIIN-100/110-A IN & U-TIGV-100-A IN; in KS #U-TIIN-110-A KS; in MN #U-TIIV-100-B MN & #U-TIGV-100-B MN; in MO #U-TIIN-110-A MO; in MT #U-TIIN-100/110 MT & U-TIGV-100-A CW; in NH #U-TIIV-100-A NH; #U-TIIV-101-B NY, #U-TIIN-100 NY; in OR #U-TIIV-100-A OR; in VA #U-TIIV-100-A VA and #U-TIGV-100-A VA; in VT #U-TIIN-100/110-A VT. 10.23 GRPFLY3



**Dream. Explore. Travel On.**