

**Exhibit A**

**WAIVER OF BENEFITS UNDER DFS**  
**BENEFIT AND COMPENSATION PLANS**

In consideration of my being permitted to perform work for or at Discover Financial Services (DFS), as an employee of a supplier or as an Independent Contractor, I understand and agree that I am ineligible to participate in Discover Financial Services (DFS)'s benefit and compensation plans, and further decline and waive any and all rights or claims to participate in these plans.

Signature: Tanmay Sharma Printed Name: TANMAY SHARMA  
Date Signed: Oct 25th 2017 Last four digits of Social Security #: \_\_\_\_\_  
Employer: COGNIZANT

\_\_\_\_\_  
Associate Supplier

\_\_\_\_\_  
Administrator