



APPLICATION FOR APPOINTMENT

Agent ID# _____

Personal Information

E-Mail _____

Name: _____

Date of Birth: _____

Social Security Number: _____

Other Names Used/Dates: _____

Home Address: _____

Home Phone: _____

List All Addresses For Past 7 Years:

_____ Dates: _____

_____ Dates: _____

_____ Dates: _____

Business Address: _____

Business Phone: _____

Fax: _____



Have you ever been convicted of or pled guilty or no contest to a misdemeanor or felony, other than a minor traffic violation? (Note: A DUI is not considered a minor traffic violation). __ Yes __ No If yes or unsure, describe in detail (Not all convictions will bar appointment. Each case will be reviewed on its own merit).

Insurance Information

List below your active licenses:

State	License#	Issue Date	Line of Business	Resident (Y/N)
-------	----------	------------	------------------	----------------

1. Have you ever had a license to write or sell insurance revoked or suspended, or have you ever entered into a Consent Order with an Insurance Department. or is your license currently under review? __ Yes __ No

If yes, explain:

2. Is your account with any Company, Agent, or insured delinquent or in dispute? __ Yes __ No

If yes, explain:

3. Do you engage in the insurance business as an individual under any name other than the one stated on this application? __ Yes __ No

If yes, explain:

Fax to Managing Agency

Monumental Life -- Corporate Entity Licensing Appointment Data Sheet

Business Information

Business Name _____
 EIN _____
 Business Address _____
 Business City / State / Zip _____
 Business Phone Number _____
 Business Fax Number _____

List all addresses for past 7 years

	Date
Address _____	_____

Insurance Information

List your active corporate licenses

<u>State</u>	<u>License #</u>	<u>Issue Date</u>	<u>Line of Business</u>	<u>Resident (Y/N)</u>
--------------	------------------	-------------------	-------------------------	-----------------------

- | | | |
|--|-----|----|
| 1. Have you ever had a license to write or sell insurance revoked or suspended, or have you ever entered into a consent order with an Insurance Department, or is your license currently under review?
<i>If yes, attach explanation:</i> | Yes | No |
| 2. Is your account with any company, Agent or insured delinquent or in dispute?
<i>If yes, attach explanation:</i> | Yes | No |
| 3. Do you engage in the insurance business as a business entity under any name other than the one stated on this application?
<i>If yes, attach explanation:</i> | Yes | No |

Direct Deposit Information

Name of Bank _____
 Bank Phone Number: _____
 Bank Rounting Number _____
 Account Type Checking _____ Savings _____
 Account Number _____

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Please print or type	Name (See Specific Instructions on page 2.)	
	Business name, if different from above. (See Specific Instructions on page 2.)	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 2.

Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.

Social security number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>												
or												
Employer identification number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>												

List account number(s) here (optional)

Part II For U.S. Payees Exempt From Backup Withholding (See the instructions on page 2.)

Part III Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 2.)

Sign Here	Signature of U.S. person ▶	Date ▶
-----------	----------------------------	--------

Purpose of Form

A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

If you are a foreign person, use the appropriate Form W-8. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Corporations.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. **Payments you receive will be subject to backup withholding if:**

- You do not furnish your TIN to the requester, or
- You do not certify your TIN when required (see the Part III instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate **Instructions for the Requester of Form W-9**.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.



PRODUCER CONTRACT

THIS CONTRACT (hereinafter referred to as "Contract") is made and entered into between MONUMENTAL LIFE INSURANCE COMPANY, an Iowa corporation, with administrative offices located at 2 East Chase Street, Baltimore, MD 21202 (hereinafter referred to as "Company") and the below-named Producer (hereinafter referred to as "Producer").

1. **Appointment:** Subject to the terms and conditions of this Contract, Company authorizes Producer to solicit applications for, and engage in the sale of, insurance policies approved for sale in the state(s) in which Producer is duly licensed and appointed. In addition, upon Company's authorization, Producer may serve as an "up-line producer" by recruiting and recommending licensed agents (hereinafter referred to as "down-line producers") for appointment with Company. All such down-line producer (agent) appointments shall be subject to review and approval by Company. Producer shall properly train and supervise any down-line producers in the performance of their appointments with Company. Producer and any down-line producers shall solicit and take applications for insurance policies identified in a Producer Commission Schedule Addendum that is incorporated into this Contract by reference. Producer has only the authority to represent Company that is necessary and appropriate for Producer to perform under this Contract. Any express authority given to Producer outside the terms of this Contract must be in writing and signed by an authorized officer of Company.
2. **Nature of Relationship:** The nature of Producer's relationship to Company shall be that of an independent contractor. Nothing in this Contract shall be construed as creating any other type of relationship. Producer shall not hold himself or herself out as an employee, partner, joint venture party or associate of Company. Producer is free to exercise his or her own discretion as to the amount of time and effort to be expended under this Contract; the most ethical manner, means and details of the conduct of his or her business; the persons from whom he or she shall solicit applications; and, the time, place and manner of such solicitations, provided that Producer conforms to all applicable state, federal and local laws, regulations and ordinances governing Company and Producer and Company's policies and procedures. Producer shall pay all expenses incurred in the performance of his or her duties. Company shall have no responsibility for withholding taxes from commissions paid to Producer or any of his or her approved down-line producers under this Contract and Company's applicable Producer Commission Schedule Addendum. Rather, any and all commissions paid to Producer and any down-line producers shall be reported by Company via I.R.S. Form 1099.
3. **Responsibilities of Producer:** Producer shall: (a) procure and maintain all necessary licenses and appointments to solicit applications for insurance policies; (b) use only promotional materials previously approved in writing by Company; (c) comply fully with all applicable federal, state and local insurance laws, regulations and ordinances; (d) ensure that the applications for insurance policies submitted to Company are accurately completed and immediately forwarded to Company; (e) return conditional receipt and policy immediately to Company for non-placed policies; (f) immediately forward to Company any negotiable instruments or monies received on behalf of Company; and (g) immediately, via facsimile, notify Company of any complaints filed with a state insurance department or any regulatory agency or law enforcement agency and thereafter promptly deliver to Company all information and documents pertaining thereto.
4. **Additional Responsibilities of Up-Line Producer:** To the extent that Company approves the appointment of one or more down-line producers for appointment, Producer, in addition to the responsibilities set forth in Paragraph 3 above, shall have the following responsibilities in his or her capacity as an up-line producer:
 - A. Producer shall (a) pay all expenses incurred in the performance of his or her duties as an Up-Line Producer; and (b) coordinate the activities of any down-line producers consistent with Company guidelines and procedures.
 - B. Producer shall familiarize himself or herself with and abide by all applicable rules, guidelines and procedures of Company and by agreement require any down-line producers to abide by these rules, guidelines and procedures, including, but not limited to, the Principles and Code of Ethical Market Conduct of the Insurance Marketplace Standards Association and the Company's Code of Professional Conduct. Company may incorporate some or all of these rules, guidelines and procedures in one or more reference documents, such as a procedure manual. The terms of such documents, and any amendments or supplements thereto, shall be deemed incorporated by reference into this Contract, except that, in the event of any conflict between the terms of such documents and this Contract, the terms of

this Contract shall control. The parties acknowledge that any Company rules, guidelines and procedures are not intended to limit an up-line producer's free exercise of his or her business judgment regarding applicants from whom he or she will solicit applications and the time and place of such solicitation. Rather, any Company rules and procedures are intended to ensure that Policy applications submitted by an up-line producer and any down-line producers conform to Company's methods of conducting its business and ethical marketing principles.

- C. Producer is authorized to recommend for appointment to Company the down-line producers it selects to carry out the purpose of this Contract. Producer shall not recommend a down-line producer for appointment with Company until the producer has secured the appropriate insurance license. The recommendation of a down-line producer shall conform to and abide by Company's instructions, rules, guidelines, policies and selection criteria for the recruitment, hiring, and licensing of producers. Company may from time to time communicate its selection criteria for recruitment, hiring, and licensing to Producer. Company shall have the authority, in its sole discretion, to decline to accept business from any down-line producer, decline to appoint any down-line producer or cancel the appointment of any down-line producer. No cause of action shall arise against Company as a result of its decision for any reason to refuse, delay, or postpone the issuance or modification of a policy on any application submitted by Producer or any down-line producers.
 - D. Producer shall coordinate the procurement and maintenance of all necessary licenses, authorizations and appointments for himself or herself and any down-line producers which are required for soliciting applications for insurance policies to be issued by Company. Producer shall not permit a down-line producer to sell Company policies until that down-line producer is duly licensed. Company will not pay compensation without the approval for appointment by the appropriate state insurance department. In contracting with any down-line producers, Producer shall use without alteration a printed form of producer's contract that is approved by the Company.
 - E. Producer is responsible to Company for all indebtedness owed to Company, including that of any down-line producers. Company shall provide information to Producer to assist him or her in the recovery of a down-line producer's indebtedness. Producer agrees to promptly pay, upon receipt of itemized statements from Company, all commission reversals and similar items in accordance with Company rules. Without limiting its rights and remedies in any way, the Company may offset debt against future commissions owed to Producer and/or any down-line producers.
 - F. Producer shall train all down-line producers regarding compliance with (1) Company's policies and procedures, (2) applicable laws and regulations, (3) the Principles and Code of Ethical Market Conduct of the Insurance Marketplace Standards Association, and (4) Company's Code of Professional Conduct. Company's engagement of Producer under this Contract does not require Producer to devote a set amount of time or resources to performing Producer's responsibilities under this Contract.
 - G. Producer shall maintain sufficient and accurate records in performing the business of Company. Producer acknowledges and agrees that Company shall have the right to periodically audit and inspect the operations and records of Producer to ensure that Producer is adequately performing his or her duties under the terms of this Contract and is in compliance with federal and state laws and regulations and the standards of the Insurance Marketplace Standards Association.
5. **Limits of Authority:** Producer shall not: (a) waive, alter, or otherwise change any provision or condition of any insurance policy or application of Company; (b) waive lapses or premium payments or quote rates other than those published by Company; (c) modify or extend the amount of time for payment of any premium; (d) enter into any contract or incur any expense or obligation in the name of Company; (e) publish, or cause to be published, anything concerning Company's business without Company's prior written approval; (f) advertise Company's services, or use Company's name, trade names, trademarks or logos in connection with its business without the prior written approval of Company; or (g) negotiate or endorse any checks, drafts or money orders made payable to Company. Producer will notify Company promptly if it has knowledge of or suspects any down-line producer is engaging in activity listed in clauses (a) through (g) of this paragraph.
6. **Payment of Commissions:** Except as otherwise provided in this Contract, or any amendment or addendum thereto, Company shall pay, and Producer shall receive, upon Company issuance of business for which premiums shall have been paid to Company in accordance with its rules, commissions calculated in accordance with the Producer Commission Schedule Addendum in effect at the time of policy application. Company may amend or modify its Producer Commission Schedule Addendum as it deems appropriate, subject to the notice provisions of Paragraph 16. In the event a Policy is lapsed, Company shall have the right, through a non-MGA agent, to preserve or replace the Policy and to place another Policy(ies) with policyholder. No further commission payments will be payable to Producer or his or her down-line producers (if applicable) as a result of Company's exercise of this provision.

7. **Debt Responsibilities of Producer:** Producer is responsible for, and agrees to indemnify and reimburse Company for, any indebtedness incurred or created by Producer. Company may at any time offset any debt(s) due from Producer under this Contract against any commissions or other compensation due or to become due to Producer. Producer agrees to pay to Company any and all indebtedness immediately upon written demand. In the event that such indebtedness is not paid within thirty (30) days of Company's written demand for payment, Company will be entitled to recover, in addition to such indebtedness, all costs of collection, including, but not limited to, court costs, reasonable attorney fees and any other debt-related expenses. Company will retain a first priority security interest and right of offset against any Commission payable to Producer. This security interest shall survive the termination of the Contract.
8. **Additional Debt Responsibilities of Up-Line Producer:** As debt occurs for a Producer acting in the capacity of an up-line producer (i.e. – a producer with responsibility for one or more down-line producers), Company may take the following actions: (a) offset Producer's debt against any commissions due, or to become due, to Producer; (b) prior to any charges to Producer for indebtedness caused by a down-line producer, Company will first inform Producer and the applicable down-line producer; (c) Producer will be informed periodically of all debt for down-line producers; (d) Company may terminate the appointment of any down-line producer, terminate that down-line producer's rights to all future commissions, and transfer all future commissions of that down-line producer to Producer, the latter having been charged back for the uncollected, down-line producer's debt; (e) Producer shall have the right to inspect Company's records supporting any charge backs or offsets upon written request to Company; (f) in the event a Producer is charged for any down-line producer's debts, all commissions from the down-line producer will be credited to Producer, as the individual charged for the down-line producer's debt; (g) upon termination of this Contract, any and all debt shall become immediately due and payable to Company by Producer; (h) as used in this paragraph, the term "up-line producer" shall refer to a producer earning override commissions from another producer, and the term "down-line producer" shall refer to a producer from whom another producer is earning override commissions. Producer agrees to pay to Company any and all indebtedness immediately upon written demand. In the event that such indebtedness is not paid within thirty (30) days of Company's written demand for payment, Company will be entitled to recover, in addition to such indebtedness, all costs of collection, including, but not limited to, court costs, reasonable attorney fees and any other expenses related to the indebtedness. Upon termination of this Contract, any and all debt shall become due and payable to Company by Producer regardless of whether the debt is attributable to Up-line or its down-line producer(s).
9. **Vesting:** First year and renewal commissions shall be vested pursuant to the Producer Commission Schedule Addendum.
10. **Assignment and Transfer:** No compensation, rights or interests arising from this Contract shall be subject to assignment without the prior written consent of an authorized officer of Company. Neither Producer's compensation, nor any other rights or interests under this Contract, may be sold, assigned, pledged or otherwise transferred without the prior written consent of an authorized officer of Company.
11. **Termination:** Producer and Company agree that this Contract, together with any riders, supplements, addenda and endorsements hereto, may be terminated at any time, for any reason, by either party, on thirty (30) days advance written notice prior to any such termination, said notice to be delivered in accordance with Paragraph 16 of this Contract. This Contract may be terminated by Company immediately, and without notice, in the event that Producer should: (a) fail to comply with any licensing or other laws or regulations; (b) file for bankruptcy or otherwise suffer a financial impairment which may affect his or her performance under this Contract; (c) improperly handle Company's funds; (d) commit any fraudulent or unlawful act; (e) commit any breach of this Contract, or any other agreement with Company; or, (f) commit any act injurious to Company or its policyholders, including but not limited to, bad faith acts such as poor field underwriting, systematic replacement of policies or inadequate or improper supervision, training or recruiting of any down-line producers.
12. **Confidentiality:** Producer agrees that he or she will not disclose any confidential information to any unauthorized person or entity. Without limiting the generality of the foregoing, confidential information of Company includes information regarding computer program processes, composition of Company products and rate setting, formulas, names and addresses and any other personal financial or health information of any of Company's policyholders, sales personnel, account or premium invoices, claimant data, including payment sheets or letters, administrative manuals, and policy expiration data. This provision shall survive the termination of this Contract.
13. **No Replacement or Solicitation:** While this Contract is in effect, and for two (2) years immediately following this Contract's termination, Producer will not, directly or indirectly, engage in any marketing activities with the intent or effect of replacing in-force business produced under this Contract or other business of Company, unless specifically authorized, in writing, to do so. Should such replacement activity take place, commissions will be adjusted according to Company rules. An isolated case of replacement resulting from marketing activities that are in no way designed to replace business will not be considered a breach of this Contract.

14. **No Recruitment or Hire:** While this Contract is in effect, and for two (2) years immediately following this Contract's termination, neither Producer nor his or her successors or affiliates will directly or indirectly recruit, solicit or induce any of Company's agents to terminate his or her employment or contractual relationship with Company. This paragraph does not apply to down-line producers recruited by Producer for appointment as permitted under Paragraph 1 of this Contract.
15. **IMSA Principles and Code of Professional Conduct:** Producer shall at all times conform to and abide by Company's instructions, guidelines, rules and requirements regarding his or her conduct of business consistent with the Principles of Ethical Market Conduct of the Insurance Marketplace Standards Association (IMSA), Company's Code of Professional Conduct and the laws and regulations of jurisdictions in which Producer and any down-line producers write business.
16. **Indemnity:** Producer shall be liable for, and will indemnify and hold harmless Company, its affiliate companies, and their respective directors, officers, employees and agents from and against, all losses, claims, demands, actions, causes of action, and the expense of defending the same (including court costs and reasonable attorney's fees) arising out of any unauthorized, negligent, intentional or bad faith act or omission, or any breach of this Contract, by Producer and/or any down-line producer from whom Producer is earning override commissions in association with this Contract.
17. **Errors & Omissions:** By execution of this Contract, Producer shall maintain the amount of Errors and Omissions coverage deemed adequate by Company.
18. **Notices:** All notices, requests, demands and other communications between the parties under this Contract shall be deemed to have been delivered upon actual receipt if hand-delivered to a party; upon three (3) days after the date of postmark if sent to a party by U.S. mail; upon the sending party's receipt of fax confirmation, if faxed to a receiving party's most recently provided fax number; or, upon transmission of an e-mail message to a receiving party's most recently provided e-mail address.
19. **General Provisions:** No modification, assignment or waiver of any term of this Contract shall be binding on Company unless in writing and signed by an authorized officer of Company. Company's failure to enforce any provision shall not constitute a waiver of any provision of this Contract. This Contract is severable. This Contract supersedes any previous contract(s) previously entered into with Company. This Contract, plus any written amendments or addenda, constitutes the entire Contract between Company and Producer. This Contract shall be construed in accordance with and governed by the laws of the State of Maryland.

CONTRACT EFFECTIVE DATE: _____

BY: _____
 Name of Producer (please print) Signature

 Company Name (if not an individual) Date Agent ID#

AUTHORIZING UP-LINE PRODUCER

I recommend that Company enter this contract with the named Producer and hereby acknowledge my responsibilities and obligations with regard to such party, a down-line producer of mine, as set forth herein and in the most current Producer Commission Schedule Addendum to this Contract.

BY: _____
 Name and Title of Authorizing Up-Line Producer Signature

 Company Name (if not an individual) Date

MONUMENTAL LIFE INSURANCE COMPANY

BY: _____
 Company's Authorized Representative Date

PRODUCER COMMISSION SCHEDULE ADDENDUM

This Addendum is a part of your Producer Contract pursuant to paragraph 6 of that document, titled Payment of Commissions. The Producer Commission Schedule Addendum, as described below, is subject to all terms of your Producer Contract.

Applicable first-year and renewal commission rates are payable to you, subject to the terms of your Producer Contract, all Addenda to the Producer Contract, and all Company rules and requirements. For any policy written by a down-line Producer, the applicable first-year and renewal commission rates payable to you will be the excess of your applicable commission rates over the commission rates of the immediate down-line Producer. For any policy written by the up-line Producer personally, the applicable total first-year commission rate payable to you may be split into two components on your commission statements: a Producer level component and an up-line Producer (override) component.

Commissions will be paid periodically in accordance with the applicable Commission Schedule Addendum in effect at the time of policy application. Producer Commission Schedule Addendum may be amended at any time solely at the Company's discretion.

First-year commissions will be paid based on placed premiums. Placed premiums under this contract means an application has been completed, underwritten completely, premium applied, and policy issued. First-year commission rates vary by product and issue age.

First-year Advance Commissions may be paid by Company for up to eight (8) months of first-year commissions. Subject to the terms and provisions of this addendum, and approval by Company, Producer's advance commission period shall be set as follows (check one):

As Earned 3 Months 6 Months 8 Months

First-year commissions paid to Producer for the period following the advance period will be paid as earned. Advance commission period may be changed at any time by Company or any further up-line Producer with Company approval. Producer will not be eligible for advance commission payments on policies covering the life of Producer, any relative of Producer, or any other contracted producer of Company.

First-year commission advances will be paid to Producer on issued and paid business on monthly bank draft only. Company retains the right to decline to pay advance commissions on any policy for which the financial risk of recovery is deemed too high. A maximum of \$10,000 will be advanced on any one policy. Further, Company may, at its discretion, place a maximum on the amount of commission to be advanced on an insured, owner/payer or household.

Renewal commissions will be paid for each policy written by the Producer or down-line Producer as premiums are paid and applied.

Producer will be charged back all unearned commissions upon policy termination, including but not limited to, refund, rescission, policy cancellation, lapse, cash surrender, exercise of non-forfeiture option, death, or acceleration of claim under a rider. Reversal of premium, including premium on a mode that extends beyond the month of the termination event, will cause a chargeback of any commission paid or credited on that premium.

Each Producer is responsible for all unpaid debts of all applicable down-line Producers as described in the Producer Contract.

Vesting – Commissions vest immediately upon placement of each policy. Producer's vested interest in commissions for any policy shall be independent of any other Producer's or down-line Producer's writing commission (or override commission) on such policy. Producer will be paid or credited vested commissions unless one of the following events occurs:

- The Producer is found to have committed an act that could cause immediate termination per paragraph 11 of the Producer Contract, titled Termination. No further commissions will be paid.



- If the Producer dies or ceases to operate while vested commissions remain payable, regular commission payouts will continue to be paid to Producer's estate for a period of nine (9) months. After nine (9) months, any remaining vested commissions may be bought out upon mutual agreement of Company and Producer's estate.
- The Producer appointment has terminated and earned less than \$500 in the calendar year. No further commissions will be paid once these conditions are met.
- Producer fails to provide Company with both a current valid mailing address and bank account number for the direct deposit of commissions. When the Company is unable to deposit commissions, a reasonable effort will be made to locate Producer for up to six (6) calendar months. During this time, commissions payable to Producer will be held by Company without interest. After six (6) months, the entire unpaid balance shall be sent through the escheat process, and all future commissions shall revert to the immediate up-line Producer.

In the event Producer is a corporation that ceases to operate as a result of merger, acquisition or insolvency, or a partnership that is dissolved, any remaining vested commissions may be bought out upon mutual agreement of Company and Producer.

Debt – In situations where the Producer or down-line Producer incurs debt, Company will follow the Debt rules in place at that time.

Policy Replacement – In cases of replacement of coverage, the commissions on the new coverage will be adjusted according to the Company's rules. Current rules regarding internal policy replacements may be referenced at the Company's website.

PRODUCER

I understand and agree to the terms of this Producer Commission Schedule Addendum.

_____	_____	
Name of Producer (please print)	Signature	
_____	_____	_____
Company Name (if not an individual)	Date	Agent ID#

AUTHORIZING UP-LINE PRODUCER

I acknowledge my responsibilities and obligations with regard to such Producer as set forth in this Commission Schedule Addendum and my Producer Contract.

_____	_____	
Name & Title of Authorizing Up-Line Producer	Signature	
_____	_____	
Company Name (if not an individual)	Date	

MONUMENTAL LIFE INSURANCE COMPANY

As an authorized Company representative, I hereby approve this Commission Schedule Addendum.

_____	_____
Company's Authorized Representative	Date



DIRECT DEPOSIT AUTHORIZATION OF COMMISSION PAYMENTS

AGENT ID# _____

Name

I authorize Monumental Life Insurance Company to automatically deposit 100% of my gross pay each pay period to my bank account listed below. If funds to which I am not entitled are deposited to my account, I authorize Monumental Life Insurance Company to direct the bank to return said funds.

FOR DIRECT DEPOSIT TO A CHECKING ACCOUNT, A VOIDED CHECK MUST BE ATTACHED.

FOR DIRECT DEPOSIT TO A SAVINGS ACCOUNT, ATTACH STATEMENT FROM BANK (ON BANK LETTERHEAD) WITH BANK ROUTING NUMBER AND ACCOUNT NUMBER.

Name of Bank:

Bank Phone #: _____

Bank Routing #: _____

Checking: _____ Savings: _____

Account #: _____

IF CHECKING ACCOUNT

ATTACH
VOIDED
CHECK
HERE