

YOUR NAME AND ADDRESS

PRODUCER COMPENSATION DISCLOSURE

As you requested, I am providing a further explanation of the compensation that to the best of my knowledge and belief, I will receive as a result of your purchase of insurance.

Compensation is stated as a percentage of the premiums that you pay in the following years:

	Life Insurance	Annuities	Health insurance
First Year	_____	_____	_____
Years 2-10	_____	_____	_____
Thereafter	_____	_____	_____

In addition to the above I may also be eligible for additional compensation such as bonuses or trips based upon additional factors such as premium and policy volume.

A producer is prohibited by law from rebating commission or other compensation, or otherwise providing an inducement to a purchaser in order to make a sale.

Producer

Date

Purchaser

Date