



APPLICATION CHECKLIST:

Each application for appointment should include the following:

- Completed application with signatures at all "X" indicators
- Copy of void check
- Copy of Insurance License
- Copy of AML Certificate
- Copy of E&O proof (if required)

FAX, MAIL OR EMAIL TO:

FinalExpenseSuperstar.com

1702 Golden Way

Beaumont, CA 92223

Phone: 909.570.1131

Fax: 951.755.4507

Email: Cody@FinalExpenseSuperstar.com

PRODUCER HISTORY

1. WRITING AGREEMENT

Please Print in Black Ink

Agency/Agent	Sex	Date of Birth	City, State of Birth (PR Only)
Corporate Contracting Information: Corporate Name (as printed on insurance license)		Your position in corporation (must be a principal)	
Residence Address	City, State, Zip		County
Business Address	City, State, Zip		Send all mail to: <input type="checkbox"/> Business <input type="checkbox"/> Home
Residence Phone	Business Phone	E-mail Address	
Agency Tax Payer Identification Number	Agent Social Security Number		Drivers License (State & Number)
Resident License State	Resident License No.	Non-Resident License States	

2. CONTRACTING QUESTIONS

- a. Have you ever been appointed with American-Amicable Life Insurance Company of Texas, Pioneer American Insurance Company, Pioneer Security Life Insurance Company or Occidental Life Insurance Company of North Carolina?..... Yes No
- b. To your knowledge, are you presently the subject of any investigation or proceeding by any insurance, securities, or commodities agency, jurisdiction, or organization?..... Yes No
- c. Are you now or have you ever been a defendant in any litigation alleging the violation of any agreement with or provision of any insurance securities or commodities law or regulation?..... Yes No
- d. Has any insurance company within the past 10 years canceled any contract with you for any reason other than the nonproduction of business or at your request?..... Yes No
- e. Have you ever been convicted of a felony or violation of 18 U.S.C. §1033 ? Yes No
 - If yes, list: Date _____ County _____ State _____
 - If a 1033 violation, attach consent letter from appropriate Department of Insurance.
- f. Do you have any judgments or tax liens, bad debts, or collections items of any kind against you?..... Yes No
- g. Are you indebted to any insurance company, general agent, or manager (including debit balances)? Yes No
- h. Have you filed for bankruptcy under any bankruptcy act in the last 10 years? Yes No
- i. During the past 10 years, has any commissioner or any Department of Insurance or any stock exchange suspended, canceled, or revoked any license issued to you, fined you, or ever refused to issue or renew any such license for any reason whatsoever?..... Yes No
- j. Have you ever had any complaints, including but not limited to complaints with an Insurance Department or Insurance Company, filed against you? Yes No
- k. If you currently hold NASD license(s), provide series number(s) _____
- l. Have you taken the Anti-Money Laundering (AML) training course through our company?
Date Taken: ___/___/___
 m m / d d / y y Yes No

If no, you **must** take the Company online AML training course located on the Company website. (See "AML Course Access Instructions" in your Contracting Kit.) **DO NOT SEND IN YOUR CONTRACT WITHOUT OUR COMPANY AML COMPLETION CERTIFICATION. (NEITHER THE LIMRA COURSE NOR ANY OTHER ORGANIZATION'S COURSE MAY BE USED).**

3. EXPLANATION - Please explain any "Yes" answers here; attach additional sheets if necessary.

This is just to advise you that your application for contract will be processed as quickly as possible. Public Law 91-508 requires that a routine inquiry may be made during our initial or subsequent processing which will provide applicable information concerning character, general reputation, criminal records, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the inquiry, if one is made, will be provided.



_____ Date

_____ Your Signature

American-Amicable Life Insurance Company of Texas

AGENT CONTRACT

This agreement, made and effective this _____ day of _____, 20____
between

THE AMERICAN-AMICABLE LIFE INSURANCE COMPANY OF TEXAS, Waco, Texas, herein called
the Company, and _____
of _____, County of _____, State of _____
herein called second party.

WITNESSETH: Sec. I. Said Company does hereby appoint second party as Agent for the purpose of procuring,
in person, applications for insurance in said Company. It is agreed that the district or territory within which the agent
shall operate (without exclusive rights to such district or territory) shall be:

The power and authority of second party to act for and upon behalf of the Company is strictly limited to the terms
and provisions hereof, and nothing herein contained shall be construed to grant to said second party, by implication or
otherwise, any right, power, authority or privilege that is not herein specifically set forth.

This contract shall constitute the entire agreement between the parties hereto and cannot be modified by any prior
or subsequent verbal promise or statement, by whomsoever made, and no supplement hereto shall be binding upon the
Company until it shall have been approved and executed in writing upon behalf of the Company at the Home Office by
its President, a Vice President, or its Secretary.

Social Security Number: _____



By: _____

(Second Party - Field Representative)

(First Party - American-Amicable Life Ins. Co. of Texas)

General Agent

By: Insurance Brokers Group Inc
Regional Director

Sec. 2. Second party shall receive as full compensation for his services commissions specified in the attached Contract Commission Schedule, subject to the conditions and provisions hereinafter set forth. Commissions shall be payable if and when premiums are paid in cash to the Company on policies and contracts issued on applications secured by second party.

Sec. 3. All commissions provided by the "*Schedule of Commissions*" are subject to the following conditions:

a. Commissions shall accrue only as premiums are paid in cash to the Company. Renewal commissions shall be computed on premiums after deduction of coupons or pure endowments.

b. If this agreement is terminated as a result of second party's death or total and permanent disability, while this agreement is in force renewal commissions as outlined in Sec. 2 hereof will be paid to second party or his legal representative as the case may be.

c. Termination of this agreement for any cause other than those set forth above shall be subject to the following conditions:

(i) If such termination occurs within 36 months of the date of this agreement, the Company shall be relieved of all liability for the payment of commissions (first year or renewal) to second party in respect to premiums received on or after the date thereof;

(ii) If such termination occurs after second party has continuously represented the Company under this or prior agreements for not less than 36 months, second party or his legal representative, as the case may be, shall be paid renewal commissions on all premiums thereafter paid in respect to policies procured by second party during the period of his service with the Company. Payment of such renewal commissions shall be continued for a period of time after termination of this agreement equal in length to the period of time during which second party continuously represented the Company prior to such termination, at the end of which time all right to further renewal commissions hereunder shall cease.

d. All rights to the payment of renewal commissions after the termination of this agreement shall cease after any calendar year at the end of which year not more than \$120 of such renewal commissions accrued to second party's credit.

e. Where the amount payable in any month would be less than \$10, the Company reserves the right to defer payment of any commissions accruing the second party until such later month as the total due and accrued equals or exceeds \$10.

Sec. 4. When any portion of the amount insured by a policy is reinsured, the Company shall, at its discretion, have the right to modify the rate of commission stated herein, and the period for which renewals will be paid.

Sec. 5. Commissions shall not be paid on premiums waived on account of death or disability, nor on flat extra premiums that are in effect for less than six years.

Sec. 6. This contract is subject to the right of the company to at any time modify or cease to issue any policy or policies named above, or to withdraw from the territory specified herein.

Sec. 7. If any policy written hereunder shall lapse for a period of ninety days and it be subsequently restored, the Company shall not be liable to second party for further commissions thereon, unless it be restored wholly through the instrumentality of second party.

Sec. 8. Should second party at any time endeavor to induce agents of the Company to leave its service or its policyowners to relinquish their policies, his right to the payment of further commissions (first year or renewal) under this and all other contracts with the Company shall immediately terminate.

Sec. 9. The contract year shall be coincident with the calendar year, and for the period between the date hereof and January 1 of the succeeding year or the date of termination and December 31 of the preceding year, all computations shall be prorated for the proportionate part of a full contract year that said period is to a full calendar year.

Sec. 10. Second party is not authorized to make, alter or discharge contracts for the Company, except as herein specifically provided, or to waive forfeitures, grant permits, make extra rates for special risks, or bind the Company in any way, and are not authorized to make any endorsement on or attach any instrument by way of illustration or otherwise to the policies of the Company, or to incur any indebtedness in the name or on behalf of the Company, or to receive any monies due, or to become due, to the Company except on receipt signed by the President or Secretary of the Company, without first obtaining from the Company permission in writing to do so. The powers of second party shall extend no further than are herein expressly stated.

Sec. 11. All advertising matter shall be submitted to the Company before it shall be printed, and shall not be printed or circulated without the written approval of the Company.

Sec. 12. No assignment of the agency, or of commissions earned or to be earned hereunder, shall be valid or be recognized by the Company unless authorized in writing by the Company.

Sec. 13. The commissions herein provided shall in no case be deemed to have been earned by, or be due to, second party until the policy has been issued and accepted by the applicant, and the first premium thereon been duly paid, and until such delivery and acceptance, said second party shall hold all monies received by him in payment of premiums as a special trust separate and distinct without any right of offset.

Sec. 14. In case any policy is issued by the Company on an application procured by second party with the assistance of any other agent of the Company, the commission on such policy shall be divided equally among the agents securing the application.

Sec. 15. The second party shall be entitled to commissions only on policies which in the opinion of the Agency Committee of the Company were fairly underwritten through the instrumentality of the second party. In no event shall the second party be entitled to any commissions on policies written in violation of any Federal or State Law or regulation. If the Company shall deem it necessary to cancel any policy and return the premium paid thereon, the second party shall be bound to repay to the Company, on demand, the amount of the commission received on premiums so returned. In all cases arising under this contract, where any commission, is questioned, the decision of the Agency Committee of the Company shall be binding.

Sec. 16. All policies shall be delivered within thirty days after the date of issuance, and no policy shall be delivered until settlement for the first premium is secured while applicant is in good health; provided, that in case any policy shall not be delivered within thirty days of issuance, such policy must be returned to the Company; otherwise, it is agreed that second party shall be liable to the Company for the same amount as if such policy had been delivered and in force and the premium thereon collected.

Sec. 17. All collections made by second party hereunder shall be kept entirely separate and distinct from other funds without any right of offset, and second party shall forthwith pay over the same in cash to the Company.

Sec. 18. The Company shall at all times have the right to reject applications for insurance without specifying cause. In case the application is rejected by the Company, second party will forthwith refund and return to the applicant or to the Company, as the Company may direct, all monies and other considerations received by second party upon such application.

Sec. 19. Second party agrees that for a period of two (2) years after the termination of second party's contract with the Company, regardless of the cause of termination, second party will not engage in any business or perform any service, directly or indirectly, in competition with the business of the Company, or have any interest, whether as a proprietor, partner, employee, director, officer or independent contractor in any enterprise that shall so engage, within the territory specified on page one of the contract. Second party understands that violation of this section will cause the immediate discontinuance of any first year or renewal commission due or subject to becoming due to second party.

Sec. 20. Any sum that may be advanced or loaned to second party by the Company by reason of the provisions hereof, or otherwise, shall be and become a debt of second party to the Company, due and payable immediately on demand, and shall become a lien against all present and future commissions earned by said second party, pursuant to the terms of this or any previous contract with the Company. It is understood and agreed by second party that any money loaned or advanced by the Company to the second party shall become a lawful indebtedness of second party and shall not be construed as an advance against commissions. It is further understood and agreed that the termination of this contract, pursuant to the terms hereof, or otherwise, shall constitute a demand for the payment of any and all indebtedness owing by said second party to the Company.

Sec. 21. Second party shall return, on demand, to the Company, all uncollected premium receipts or undelivered policies sent to him for delivery and collection, and he shall comply with all such rules as the Company may have established or may hereafter establish, and shall perform such other necessary duties as may be required in connection with the general business of the Company as it relates to this contract, without further compensation than as herein provided.

Sec. 22. Should second party wrongfully withhold any funds, policies, premium receipts, vouchers or other property belonging to the Company or to an applicant for insurance, or others, or should second party refuse to pay any indebtedness owing to the Company by virtue of this contract, or violate any governmental law or regulation, relating to the subject of insurance, this contract may be terminated forthwith and all rights and claims of second party hereunder, including the claim for payment of any further sums of money, are likewise terminated and he shall not be entitled to receive any further commissions or other sums of money, whatsoever, from the Company. Second party shall reimburse the Company for any costs, expenses, or legal fees, that the Company may incur in recovering funds wrongfully withheld, policies, premium receipts, vouchers, or any other property belonging to the Company, or to an applicant for insurance, or for the defense of any action wherein the Company and second party, or either of them, is charged with the violation of any governmental law or regulation relating to the subject of insurance as a consequence of the alleged conduct of second party. Said second party shall reimburse the Company for any sums of money that it may be compelled to pay by reason of such action or proceeding; but nothing herein shall affect any claim of the Company against second party.

Sec. 23. Second party shall not institute legal proceedings in the name of the Company against an applicant for insurance or policyowners of the Company, or against any other party, for any cause arising out of the business transacted under this contract, unless such action shall be approved in advance, in writing by the Company. Should either of the parties hereto be sued, or otherwise involved in any judicial, administrative, or quasi judicial proceeding by reason of an alleged act of second party, the Company may defend the suit, action or proceeding or may require second party to defend the same, but in case second party is so required to defend, and the Company shall be dissatisfied with the manner in which such defense is conducted, the Company may employ counsel to conduct such defense, and all expense incurred by the Company, including costs, attorney and counsel fees, shall, in either event, be paid by second party, and the Company shall be reimbursed for any expense incurred by it in defending itself and second party, or either of them, arising out of any such action or proceeding, whatsoever. The Company shall, in its discretion, have the right to settle any claim or claims of applicants for insurance, policyowners, and all others, against second party, in consequence of any alleged misrepresentation or fault of second party, and second party shall be held responsible and liable to the Company for any monies and expenses paid out in effecting such settlement, and hereby agrees to reimburse the Company for any monies so paid out.

Sec. 24. Second party shall, under no circumstances whatsoever, pay or allow, or offer to pay or allow, any rebate of premium in any manner whatsoever, directly or indirectly, and shall not violate any of the laws relating to the subject of insurance of the state in which he may be acting as agent of the Company, and in case second party shall violate any of the provisions of this section, then this agreement shall thereupon cease and terminate.

Sec. 25. All books of account, documents of any kind, vouchers, receipts, notices, lists of policyholders, or books or papers of any kind used from time to time by second party in connection with this agency shall be and remain the property of the Company, and the same shall be subject at all times to inspection by the Company, on demand, and at the termination of this contract the same shall be delivered to the Company on demand therefor.

Sec. 26. The Company may offset against any commissions or other claims due and to become due to second party under this or any other contract, any debt or debts owing at any time by said second party to the Company, whether due or not, and any such debt or debts shall be a first lien against said commissions and other claims.

Sec. 27. The second party is to pay all agents' taxes, municipal licenses and taxes required by the municipal laws of the territory covered by this agreement.

Sec. 28. Failure on part of second party to secure for Company any new paid life insurance during any period of ninety (90) consecutive days shall automatically terminate this contract.

Sec. 29. Unless otherwise terminated, either party hereto may terminate this agreement without cause, by sending the other at last known address, by mail, thirty days' notice in writing to that effect, or by delivery of such notice in person, and all funds, policies and vouchers shall be fully accounted for.

Sec. 30. The failure of the Company to require a strict compliance by second party with any terms or conditions of this agreement or to declare a default or forfeiture when the same shall become known, or exercise a right to terminate this agreement for violation by second party of his obligations hereunder, shall not operate as a waiver of such terms or conditions, of such obligations of second party or of such default of forfeitures, of any right of the Company hereunder.

Sec. 31. Nothing in this contract shall be construed to create a relationship of employer or employee between the Company and the second party and, within the territory herein described, the second party shall be free to exercise his own judgment as to the manner in which he conducts his business, including, by way of illustration but not limitation, the manner of soliciting business, hours

This contract is performable in, and all sums due from one party to the other are payable in McLennan County, Texas, and all legal proceedings in regard hereto shall be instituted in McLennan County, Texas, and the parties hereto expressly waive any privileges they may have as to venue contrary to this provision. It is further expressly agreed that all provisions of this contract and any controversy that may arise thereunder shall be construed according to the laws of the State of Texas.

It is agreed that the ledger account of the Company shall be competent and sufficient prima facie evidence of the state of accounts between the parties hereto. The Company agrees to furnish the second party within a reasonable time after the end of each calendar month a copy of said account of transactions for the previous month. Failure of the second party to object in writing to any alleged error of the account as furnished within sixty (60) days from the date of the mailing of such copy by the Company shall be conclusive and binding on second party as to the correctness of such account.

ANTI-MONEY LAUNDERING TRAINING COURSE ACCESS INSTRUCTIONS

1. Access your contracting company website at one of the four companies below:

American-Amicable	http://www.americanamicable.com
Occidental Life	http://www.occidentallife.com
Pioneer American	http://www.pioneeramerican.com
Pioneer Security	http://www.pioneersecuritylife.com

2. Click on "Marketing Sales"

3. Enter Agent No., and Password. (Agent No. is: **aml** and Password is: **course**)

4. Hit enter and follow instructions.

IMPORTANT!!

When you complete the course, a Company AML training course certification page will reflect on your computer screen. Make two copies of this page. One is for your file and the other **must** be sent to the Company with your contracting paperwork.

**IF THE CERTIFICATION PAGE IS NOT SENT TO THE COMPANY WITH YOUR
CONTRACTING PAPERWORK, YOUR CONTRACT WILL NOT BE PROCESSED!!**

CONSUMER REPORT NOTIFICATION AND AUTHORIZATION


Through this document, American-Amicable Life Ins. Co. of TX, Pioneer American Ins. Co., Pioneer Security Life Ins. Co. and Occidental Life Ins. Co. of NC, disclose to you that a consumer report or an investigative consumer report, is being obtained from a consumer reporting agency for the purpose of evaluating you for appointment as an agent. This report may contain information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, criminal records, personal characteristics, or mode of living from public record sources or through personal interviews with your neighbors, friends or associates. You may also have a right to request additional disclosures regarding the nature and scope of the investigation and a written summary of your rights as a consumer.

I authorize and request any consumer reporting agency to furnish any and all information in their possession regarding me in connection with my appointment for agent. A photocopy of this authorization may be accepted with the same authority as the original, and I specifically waive any written authorized request.

I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

I authorize, American-Amicable Life ins. Co. of TX., Pioneer American Ins. Co., and Pioneer Security Life Ins. Co. and Occidental Life Ins. Co. of NC, to share this information with the appropriate people involved in the licensing and contracting process.

Print Name _____

Signature  _____

Date of Birth (for identification purposes only) _____

Social Security Number (for identification purposes only) _____

If name changed (through marriage or otherwise), print former name here

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
	List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. 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 3. 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 3.

Social security number
or
Employer identification number

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II 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. citizen or other U.S. person (defined below).

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 4.

Sign Here	Signature of U.S. person	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain 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 provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

COMPLIANCE POLICY STATEMENT OF UNDERSTANDING

I acknowledge that I have read and understand the contents of the Compliance Manual (**Form No. 9528-C**) for **American-Amicable Life Insurance Company of Texas, Pioneer American Insurance Company, Pioneer Security Life Insurance Company, and Occidental Life Insurance Company of North Carolina.**

I acknowledge that I have read and understand the contents of the Compliance Manual and further understand that if I do not comply, in full, with its provisions it will be a violation of my contract and may result in, without limitation, the cancellation of my contract(s) with the before mentioned Companies.

1. I acknowledge the need for strict compliance with all applicable state and federal regulations regarding the solicitation and sale of insurance.
2. I understand the Companies will insist upon **strict adherence** to all applicable state and federal regulations regarding the solicitation and sale of insurance and understand that I am individually accountable for my own actions.
3. I acknowledge that I must be professional in my sales presentations. I acknowledge that I must accurately and completely describe the insurance product being offered, help the purchaser understand the terms and conditions of the insurance product being sold, and comply with all applicable state and federal regulations. I understand that violations of the Compliance Manual or applicable insurance regulations may result in the immediate termination of my contract with the companies.
4. I understand that I must immediately take the Company online anti-money laundering training course and that other organization's courses will not be accepted as substitutes. I understand that I must take a refresher of the company online anti-money laundering training course every two years.
5. I acknowledge that this Agreement does not alter or amend my contract or contracts with the Companies or create an employment relationship with the Companies. This Agreement does not change the at-will relationship between the parties and me. The contract or contracts between the Companies may be terminated at any time by either party upon notice, as set forth in those contracts.



Producer Signature

Producer (Print Name)

Date

Annualization Plan Supplemental Agreement and ACH Deposit Request

This Supplemental Agreement supplements your agent contract with the undersigned, selected Company(ies). It is intended to provide you with an advanced payment of a portion of first year commissions due on business written by you or your agents.

Plan Provisions:

1. Commissions paid under this Supplemental Agreement are an advance of commission from us to you. Such commissions are considered unearned and an indebtedness under the terms of your contract with us until sufficient premiums are paid on a policy to justify the commissions advanced.
2. While this Supplemental Agreement is in effect, we will pay you advanced commissions as a percent of 1st year commission due on the annualized premium. Excess and renewal commissions and service fees will not be advanced.
3. Policies issued on a monthly direct premium mode, policies that have been reinstated, or policies on you, your spouse, your parents, children, brothers, sisters, business associates or employees are not eligible for annualization under this Supplemental Agreement.
4. We reserve the right to declare any policy not eligible for annualization.
5. We may, at our discretion, impose a per Policy maximum to any advanced commission payments.
6. If any Policy included in any advanced commission payment terminates for any reason prior to the end of its first Policy year, any unearned advanced commission for that Policy is repayable to us on demand, and may be deducted at our sole discretion from any commissions which would otherwise be payable to Agent.

Termination Provisions:

1. Continued eligibility for this plan is at our sole discretion. This Supplemental Agreement may be terminated by you, your recommending agency or us at any time. This Supplemental Agreement shall automatically terminate upon the termination of your contract with us.
2. Upon the termination of your contract, any advanced commissions which have not yet been earned will be treated as an indebtedness under the terms of your contract with us. This provision survives the termination of this Supplemental agreement.

Agent Name _____ Date _____

Signature of Agent _____

As General Agent for the above agent, I agree to assume any indebtedness that may result from this Supplemental Agreement and that such indebtedness will be considered an indebtedness under the terms of my contract with the Company(ies).

Print Recommending Agency Name Insurance Brokers Group Inc Advance % _____

Signature of Recommending Agent _____ Date _____

Accepted By:

- American-Amicable Life Insurance Company of Texas
 Occidental Life Insurance Company of North Carolina

- Pioneer American Insurance Company
 Pioneer Security Life Insurance Company

Signature of Authorized Officer _____ Effective Date _____

ACH Deposit Request

Bank Name _____

Bank Address _____

Transit-ABA Number _____

Account Number _____ Checking Savings

PLEASE ATTACH A VOIDED CHECK OR DEPOSIT SLIP HERE.