

Agent Lead Financing Agreement

Lead financing is designed to help agents get started in final expense but please remember that it is a privilege and not a right. By signing this form you agree to the following:

1. Agent agrees to accept/purchase ALL leads received from the mailing request for him/herself and all sub agents,
2. Mailing demographics for leads are as follows:
 - a. Ages 50-85 years
 - b. Income of \$0-\$50,000
3. Agent is responsible for pre screening and selecting zip codes/counties that fit within his/her desired working demographic,
4. Leads are exclusive to one agent and cost \$26 each (subject to change with notice),
5. Agents are ONLY allowed to sell leads using OUR group of insurance companies,
6. Agent are required to average \$80 in annual premium, or more, on leads taken. For example, if an agent finances 25 leads, he/she is required to submit a minimum of \$2,000 AP ($\$80 \times 25 \text{ leads} = \$2,000$) before more leads will be financed for the agent.
7. 3rd party lead vendors reserve the right increase the lead cost at any time with notice,
8. Agent permits the agency to apply/change debits to his/her commission as follows:
 - a. Total lead debt of \$0-\$1999=35% commission deduction to repay lead debt
 - b. Total lead debt of \$2,000-\$4,999=50% commission deduction to repay lead debt
 - c. Total lead debt of \$5000+=100% commission deduction to repay lead debt until production and lead debt is congruent with agency standards
9. Agency financing is only available to agents with 10 or more active policies issued and paid with our group of companies,
10. Agency reserves the right to discontinue lead financing for any reason,
11. In the event that an agent terminates or is terminated from our group of companies, agent promises to repay monies owed for financed leads. FAILURE TO REPAY DEBTS WILL RESULT IN COLLECTION ACTIVITY AND/OR JUDGEMENT.

Agents are not required to use agency financed leads. Agents have the right to use any lead source they desire if they do not agree to the above. By signing below, you agree to the above in its entirety.

Agent Printed Name

Agent Signature

Date

LEAD SAMPLE:

2014 Benefits Information for Idaho Citizens Only

You may qualify for a state-regulated life insurance program to pay for your final expenses regardless of your medical condition, even if you have been turned down before.

It is important you know how to qualify for this benefit available to you. This benefit will pay for 100% of all funeral expenses up to \$35,000. This payment is tax-free for IDAHO residents.

You are entitled to received no-cost information as a resident of IDAHO. IMPORTANT- Return this postage paid card within 5 days.

Tom Smith
1234 Maple St.
Anywhere, ID 12345-1234

Name: _____
Home Address: _____

Phone: _____
Age: _____ Spouse's Age _____
Spouse's Name _____