

DEBT VERIFICATION AUTHORIZATION

Mutual of Omaha Insurance Company and its affiliates (together, "Mutual of Omaha") are a Vector One subscriber. Accordingly, as part of the contracting and appointment process and determination of eligibility for advancement of commissions, Mutual of Omaha will conduct a commission related debt verification report on Vector One's Debit-Check.com secured web portal to determine if another insurance carrier has reported that you have an outstanding commission-related debit balance. Mutual of Omaha will consider the results of the commission related debt verification report in order to determine your eligibility to be contracted and appointed, or to receive advanced commissions as an insurance producer. We will obtain the commission related debt verification report from:

Vector One Operations, LLC
P.O. Box 12368
Scottsdale, AZ 85267
(800) 860-6546

For California, Minnesota and Oklahoma: You have a right to request a copy of the results of the commission related debt verification report.

Yes, please provide me a copy of the results of the commission related debt verification report.

CANDIDATE'S STATEMENT – READ CAREFULLY

Mutual of Omaha is hereby authorized to obtain and conduct a commission related debt verification report through Vector One Operations, LLC's Debit-Check.com secured web portal to determine if another insurance carrier has reported that I have an outstanding commission-related debit balance. I understand that Mutual of Omaha will consider the results of the commission related debt verification report in order to determine my eligibility to be contracted and appointed or determine my eligibility for advancement of commissions as an insurance producer.

AUTHORIZATION

I authorize Vector One Operations, LLC to furnish the results of its commission related debt verification report to Mutual of Omaha.

I understand that if contracted, this authorization will remain valid as long as I am contracted with Mutual of Omaha.

A photocopy of this authorization shall be considered as effective as the original.

Signature

Date

Print Name