



Peek Performance, Inc.
4115 East North Street Ste. 201
Greenville, SC 29615
864-228-2635 Office
800-539-1021 Fax

Peek Performance Inc. (PPI) Agent Agreement for Walmart Program

THIS Contract sets out the complete agreement by and between PEEK PERFORMANCE INSURANCE, INC. and of Greenville, SC, herein called "PPI", and their affiliated insurance agents, groups or agencies, past or future, all herein called "Agent." By signing this PPI Agent Agreement, the Agent and all sub insurance agents without exception within this agency agree to be bound by it, and any similarly executed addendums, attachments, or schedules that may be executed and made a part of this Contract. Any and all sub agents, which would include the use of any Certified Application Counselors/CAC's, Certified Medical Cost Sharing Representatives, "Association" sales representatives and Navigators, utilized by the Agent to do ACA or other health and ancillary sales that benefit the Agent are subject to the provisions of this agreement. PPI expects to maintain agreements for services with insurance companies, herein called "COs" which are necessary to enable Agent to solicit applications for insurance. The Agent understands that in order to be granted access to the agreed upon commission levels, Insurance Sales Technology and Quoting Tool(s), PPI Proprietary Training/Marketing, and Administrative oversight, as provided by PPI, COs or other organizations, that this Agreement must be signed. This agreement also supersedes any other PPI marketing agreement related to ACA/Health/Ancillary/Medicare sales marketing that may precede or follow this agreement with non-PPI relationships such as with COs or with any partnering Agencies, or other contracts until it is completely satisfied or is terminated with cause or is terminated by mutual signed agreement. WHEREIN IT IS MUTUALLY AGREED UPON AS FOLLOWS:

Agent agrees to abide by the procedures and terms of the Walmart retail program which may be updated from time to time. If the agent does not want to comply with this program, the agent may withdraw and receive a full refund of their initial fee.

WALMART – ALLSTATE PROGRAM TERMS & CONDITIONS

PRODUCTS AND CONTRACTS

Agent agrees to only offer ACA products, and Allstate/National General ancillary products to consumers met at Walmart. Agent may not offer Medicare products, except for the Allstate/National General Medicare Supplement plan, but can refer leads for Medicare products to Allstate for a referral fee.

All sales are vested day 1 unless the agent is terminated for cause as described herein.

Agent agrees to appoint with PPI for all ACA carriers.

Agent agrees to move any of their existing ACA carrier appointments under PPI as soon as possible, and not later than once the 2024 OEP period transfer blackout period has expired or have their pay rate reduced on ACA business they have sold.

Agent agrees to appoint to Allstate/National General through PPI.

PPI/Allstate and Walmart retain the right to replace low performing agents as they deem appropriate. Replaced agents will be allowed to immediately revert to the previously held higher commission level if they enjoyed a higher level prior to engagement in this program.

COMMISSIONS

Commissions will be typically about \$2 PMPM below full street level. See commission schedule for specific amounts per carrier and product.

Agents agree to assign their ACA commissions to PPI who will pay the agents.

Agents agree to be paid directly by Allstate for ancillary sales.

Agents agree to be paid for Medicare referral sales, \$100 first year and \$40 renewal.

STORE FEES

Agent agrees to pay \$207 up front at time of application for first month's payment to Walmart, and to be charged \$207 per month in advance. Store fees are subject to change. Agent may cancel for future months with 30 days advance notice by emailing walmartsales@ppisales.info. No refunds will be given unless an agent is not added to the program or stores in preferred locations are unavailable.

HOURS AND SCHEDULE

Agent agrees to work a minimum of 20 hours per week from 3pm and afterward on days of their choosing to get 20 hours per week. Stores that do not have a Humana/Marketplace Medicare representative may be served earlier in the day.

Agent agrees to start as early as mid October 2023 and work through January 2024.

ERRORS AND OMISSIONS INSURANCE

Agent agrees to hold E&O coverage in the amount of \$1 million dollars per occurrence and \$1 million dollars in aggregate annually and to furnish a copy of their current Errors and Omissions policy upon application.

CERTIFICATIONS AND LICENSING

Agent agrees to obtain annual CMS (FFM) certification and provide documentation of such on request to PPI.

Agent agrees to maintain all compliance, consumer consent and other Federal, State, DOI, and CMS regulatory requirements in order to continue receiving commissions.

APPLICATION PROCESS

Agent agrees to consent to a background check as part of the application process for this program.

ENROLLMENT PLATFORM USE

All ACA business submitted under a carrier appointed through PPI may be written under the agent's NPN.

Agent agrees to utilize two accounts on Health Sherpa for enrolling persons:

Agent agrees to use PPI's "Walmart" Health Sherpa Platform agency code to write all ACA business from sales made to persons met while working their designated hours at Walmart.

Agent agrees to use PPI's Health Sherpa Platform agency code to write all ACA business from sales made to persons NOT met while working their designated hours at Walmart.

Agent is paid at the same rate for all sales, whether in Walmart or outside of the store. However, PPI requires all outside sales to be enrolled on separate platforms. Agent agrees to comply with sales reporting requirements as may be assigned by PPI or Allstate.

On either the PPI Walmart platform or the PPI platform: For each carrier that the agent is not or cannot be appointed under PPI, the agent must attribute each sale for these carriers to the PPI NPN on the PPI Health Sherpa affiliated enrollment platform. The agent will keep a record of these sales and will be paid at the full contracted rate if the record provided by the agent including the policy number matches carrier data on policies paid to PPI.

TERMINATION

Agent may be terminated from the Walmart program by PPI and or Allstate/Walmart for not working 20 hours a week, not writing business on designated platforms, or lack of production.

If agent is terminated from this program, their income is vested unless terminated for cause. Walmart/Allstate retains the right to replace PPI agents as they deem appropriate and in such case the agent's income is vested unless terminated for cause.

Agents may be terminated for cause by PPI, Allstate and/or Walmart for not writing business on designated platforms, not maintaining E&O, licensure, or other regulatory requirements. Also bad conduct resulting in termination from the Walmart program and loss of ACA commissions earned during their tenure at Walmart. In case of termination for cause, no store fees will be refunded.

AGENT QUITTING PROGRAM

If an agent quits the program, they may do so with 30 day notice, future monthly fees cease, no monthly fees are refunded, income earned is vested.

Agents who choose to leave or are dismissed from the program are entitled to return to a higher level of compensation for new ACA sales after departure if they had relinquished the higher compensation in order to participate in this program. This will apply to all sales incurred on a go forward basis after departure from the program.

Agents who choose to participate in the Walmart program and later decide to leave PPI understand that no releases will be granted prior to the end of the 2025 OEP.

PPI Agent Agreement (Cont.)

APPOINTMENT

PPI hereby appoints the Agent to act on its behalf and be a representative of PPI only to the extent authorized herein. The Agent agrees that PPI or COs, as a condition of such appointment, may periodically at their discretion complete an investigative report, including information regarding character, credit/income, reputation, and general health as set forth under the FAIR CREDIT REPORTING ACT.

RELATIONSHIP

The Agent's relationship to PPI is that of an Independent Contractor and nothing contained herein shall be construed as creating the relationship of employer and employee between PPI and the Agent. The Agent shall be free to exercise his own judgment as to the time, place and manner in which to perform the services authorized under this Contract. No authority shall be implied from the authority expressly granted. The relationship does however create expectations of performance from the Agent toward PPI in order to justify the attached commission schedule.

LIMITATION OF AUTHORITY

Except as expressly provided herein, the Agent or sub-agent shall have no authority, expressed or implied, actual or apparent, to act or fail to act or do anything whatsoever on behalf of PPI. The foregoing limitation of authority includes, but is not limited to the Agent and sub-agent not being authorized to (i) make any contract or incur any debt in the name or on behalf of PPI; (ii) make, modify or amend any application for insurance or any policy of insurance; (iii) extend or modify the time for making any payment which may become due on any policy; (iv) waive, alter, modify or amend any of PPI's rights, privileges or obligations under its policies or applications; (v) collect or receive premiums other than the initial premiums with applications for insurance; (vi) institute any type of administrative or legal proceedings in the name or on behalf of PPI for any cause or reason; or (vii) make any misrepresentations, promises or agreements on behalf of PPI. No act, forbearance or neglect on the part of either the Agent or PPI shall be construed as a waiver of any of the provisions of this Contract or imply the existence of any authority on behalf of the Agent not expressly granted herein.

ADVERTISING

The names, logos, trademarks and other advertising of PPI or COs may not be used unless approval is received in writing, and then only while this Contract is in effect. All circulars, advertisements or other material pertaining to PPI, COs or proprietary products or services, which you shall publish, print, distribute or use in any way shall not be used until first approved in writing by PPI and/or COs.

CONDUCT

PPI and COs may from time to time prescribe rules and regulations with respect to the conduct of the business covered herein. The Agent shall conform to and observe such rules and regulations as established. The Agent shall not make any misrepresentation in connection with the sale of any insurance or other program/policy or the solicitation of any application. The Agent also will require appropriate market conduct from all affiliates and sub agents regarding the sales and marketing of insurance and will create retraining and corrective protocols (including termination) to address any sales and marketing infractions that might occur.

SOLICITATION

The Agent is hereby authorized to solicit applications only for the approved ACA, Sharable, Association and related ancillary plans, Medical Cost Sharing non insurance programs and products offered by PPI through COs, but only in those states that the Agent, PPI and COs are authorized to do business in and provided that the Agent is in

compliance with all applicable regulatory licensing requirements at the time of solicitation. The Agent agrees to assist PPI in obtaining documentation necessary for COs to issue policies. This authority will also apply in the Senior and / or Life markets should the Agent determine to do those business lines with PPI.

COLLECTION OF MONEY

The Agent is not authorized to receive or collect any money due or becoming due to the COs with the exception of the initial premium payment on applications being obtained by the Agent. Initial premium checks should be made payable to COs or other entities as designated by PPI. The Agent shall have no authority to endorse or present for collection any check, draft or other instrument made payable to PPI or COs. Any and all monies collected shall not be used by the Agent for any personal or other purpose whatsoever but shall be immediately sent to CO (or PPI if appropriate) for processing. Authority of the appropriate state Department of Insurance in which the sale is applicable must be granted for any prospective exception to this clause.

COMMISSION COMPENSATION

As compensation to the Agent, in full, for the performance of services as authorized in the Contract, PPI will pay commissions as set forth in the attached Schedules of Commission. Since the PPI and CO's may choose to modify their commission agreements annually (or at other times), the rate of commissions may be changed, altered or amended from time to time by COs, and effective upon any business written by the Agent subsequent to the effective date of the change or as the COs may require. Typical reasons for a commission adjustment would be: an increase of commission due to higher production, a CO modification of commissions, an increase of commission to accommodate the recruiting of downline agents/agencies, or a modification (increase or decrease) based on a change from the insurance company commission schedule to PPI, or a reduction of commission based on exceptionally low sales production based on sales expectations provided by the Agent when they acquired their desired level of compensation. Commissions are calculated on the basis of the commission rate on the effective date of the policy in the original commissionable policy premium (or per member per month rates), unless the commissionable policy premium/rate is decreased, at which time commission will be paid on the decreased premium/rate. Commissions are not payable on administrative fees or policy application fees unless specified by the CO. In the event that PPI's commissions on any in-force premium are reduced, commissions to the Agent on the same in-force premium will be reduced in similar proportion. If commissions must be refunded by PPI to the COs, the Agent shall repay to PPI corresponding commissions that may have been previously paid to the Agent or sub agents. Commission advances are the sole discretion of PPI and may be changed at any time by PPI without prior notice. Each advance paid to the Agent will be charged (debited) to the Agent's account, and PPI will credit the Agent's account with all commissions earned by the Agent. A debit balance in arrears owed to PPI or an Insurance Cos may be retained from other commissions earned by a separate Insurance company in order to repay the debit balance. The Agent and any/all affiliates may not market directly or indirectly the same or similar product through other commission sources within the same insurance company.

RECRUITING, CONTRACTING, AND COMMISSIONS

The Agent is authorized to recruit other soliciting agents for contracting with PPI. All contracts with such agents shall be made with PPI and completed under the oversight and training of PPI's administrative internal employees by the Agent's home office staff as provided by agreement by the Agent. Any Agent who has an MGA/Level 7 or higher level of contract agrees that they shall provide a minimum of 1 (one) administrative staff for the purpose of processing all sub agent contracting and shall increase the number of administrative staff as deemed necessary by PPI in proportion the sub agent contracting volume. PPI reserves the right to refuse to contract any proposed agent, or once done, to thereafter terminate the same. All agents and agencies agree that all CO contracts will be held within the PPI hierarchy for a minimum of 24 months from date of this agreement, except by written consent of PPI. Should an agent be authorized by Agent and PPI to manage sub-agents, the Agent shall be responsible to PPI for the fidelity and honesty of any sub-agents, and for all funds collected or business done by or entrusted to

him or his sub-agents. The Agent shall indemnify and hold PPI harmless from the expenses, costs, causes of action and damages resulting from or growing out of acts or omissions by him, his sub-agents or employees. The Schedules of Commissions constitute the total commission payable to Agent. Commissions payable to Agent will be paid directly by PPI or COs as typically noted in the Schedule of Commission.

REFUNDS

The Agent shall make prompt refund of all commissions paid to Agent or sub-agents on which the COs declines to issue a policy and on any early termination, on any application on which a policy shall be issued by the COs and not accepted by the applicant, or when overpayment or erroneous payment has been made. The Agent shall also make prompt refund of all commissions to PPI if the COs rescind any/all premiums due to a fraudulent application, death of a client (in which a chargeback occurs) and other similar conditions. If any premiums shall be refunded by the CO for any reason or cause before or after termination of this Contract, the Agent shall repay to PPI all commissions previously allowed on that premium. PPI reserves the right to offset all commissions accrued or to accrue to the Agent against any refunds due from the Agent or his sub-agents.

DELIVERY OF POLICIES

All policies sent to the Agent shall be delivered promptly to the applicant, and whenever delivery of the policy cannot be made within 10 days of being received by the Agent, the Agent will immediately return the policy to PPI with a written report stating the specific reason for non-delivery.

SERVICE OF POLICIES

The Agent shall service all policies that the Agent initially sells. Agent agrees that commissions paid to Agent in accordance with the terms herein constitute full payment for soliciting the application that resulted in the policy being issued and the continued servicing of the policyholder. In the event that the policyholder shall request another agent of record, if the soliciting agent received commission from PPI, or COs after such change, then the balance of commissions owed would be payable to PPI by the Agent. All subsequent commissions will be paid to the requested agent of record. Insurance company and Governmental Regulatory body guidelines will typically prevail.

AGENT'S FEES AND EXPENSES

The Agent shall be responsible for the payment of all taxes, fees or levies imposed upon him for the purpose of doing business. The Agent shall pay for all expenses incurred by him in the performance of this Contract, unless the Company has agreed in writing to do otherwise. Should actions taken by the Agent or sub agents result in any penalties, fees or levies by any State or Federal governing body or Insurance Company be applied to PPI, the Agent will immediately make payment for those and any audit, accounting or legal costs associated with said claim.

INDEBTEDNESS

PPI shall have a first lien on all commissions payable under this Contract or any monies due PPI by the Agent for any debt owed by the Agent or his sub-agents to PPI or to another person or persons acting for PPI. For purposes of this Contract, indebtedness shall include, but not be limited to, as earned or advanced commissions, lead costs, collection fees including attorney fees, or other cash advances. PPI may at any time offset against all commissions accrued or to accrue to the Agent any debt due from the Agent arising from all transactions under this or any other previous Contract or any amount becoming due from a sub-agent of the Agent. The entire indebtedness of the Agent may be deemed due and payable in full within sixty (60) days of demand by PPI. PPI shall have the right to escrow an Agent's earned commissions to secure the indebtedness of sub-agents for which the Agent is responsible. If policy persistency below 70% occurs, then PPI shall have the right, at its discretion, to adjust availability of advance, commission levels, and/or rate of escrow levels.

ASSIGNMENTS

No assignment of this Contract or any compensation payable hereunder shall be valid and binding on PPI, unless authorized in advance, in writing by the **President or Treasurer** of PPI. Any assignment so authorized shall be subject to all indebtedness of the Agent then existing or thereafter occurring.

ALL SUMS PAYABLE

All sums of money due and to become due PPI from the Agent shall be payable at the PPI office at 4115 East North Street Suite 202, Greenville, South Carolina, 29615.

ACCOUNTING

Each month, or at reasonable intervals, PPI or the CO's will furnish the Agent with a statement of his account and remittance for any amount due him. The Agent hereby agrees that the ledger accounts of PPI shall be competent and sufficient prima facie evidence of the state of accounts between the parties hereto. Upon receipt of such statement, the Agent shall immediately examine it, and if not satisfied as to the accuracy and correctness of it, shall return said statement and remittance to PPI with full particulars of any discrepancy therein. Failure of the Agent to notify PPI within twenty (20) calendar days from the date he receives such statement and remittance shall be deemed an admission by the Agent of the accuracy and correctness of such statement and remittance. PPI may charge a pass-through fee to the agent and/or any per app fees as may be charged by the payroll administrator.

AGENT RESPONSIBILITIES UNDER FEDERAL AND STATE TAX LAWS

The Agent is hereby advised that as an Independent Contractor, the Agent has certain responsibilities under the federal and state (where applicable) tax laws. The Agent must report all commissions to the Internal Revenue Service and appropriate State Department (where applicable) on the appropriate tax form and pay certain taxes due with respect to these amounts. To assist the Agent in complying with these requirements, PPI, after the close of each calendar year, furnishes the Agent with a copy of the Form 1099 that PPI is also required to send to the Internal Revenue Service and, if applicable, appropriate State Department.

VIOLATION OF LAWS, REGULATORY GUIDELINES AND PPI RULES

The Agent shall not rebate or offer to rebate any premium or premiums on a policy of insurance issued by the COs, or induce any customer of PPI to discontinue the payment of any premiums on any policy, or induce or endeavor to induce any Contracted agent of PPI to discontinue active service, or violate any insurance law, regulation or ruling of any Insurance Commissioner of Department in any State or Federal Agency or violate COs prescribed rules or regulations. In the event the Agent should do any of the acts aforementioned before or after termination of the Contract, PPI shall have the right, at its discretion, to declare a complete forfeiture of any and all compensation due or to become due under this Contract. Agent further agrees to allow only sub agents who are appropriately licensed, appointed, credentialed, and certified to engage in insurance sales.

TERMINATION WITHOUT CAUSE

The Agent or PPI may terminate this Contract at any time by giving a ten (10) day written notice to the other of such termination and mailing this notice to the last known address of the other party. In the event the South Carolina Department of Insurance (or other applicable state department of insurance) terminates the Agent's "agency" or "agent" status, PPI shall terminate this Contract. Termination of this agreement by the Agent or by PPI does not constitute a release of insurance company appointment nor does it guarantee vested commissions payable to the Agent, unless Agent has satisfied terms of vesting as described below.

TERMINATION WITH CAUSE

This Contract may terminate "for cause" or "with cause" immediately if Agent violates any provision of this Contract, fails to respond in a timely manner to an any allegation by a Department of Insurance or insurance company or other State or Federal regulatory body, fails to repay a debit balance for commissions received, is adjudicated bankrupt or violates any provision of the marketing agreement. Further if the Agent experiences the Loss or Termination of Insurance license due to Revocation by a regulatory body as a result of a determination of wrongdoing by the Agent or sub agent(s), or if the Agent experiences termination of appointment by an insurance company because of a determination of wrongdoing by the Agent, then PPI may consider this/these event(s) as a "with cause" termination of this agreement and may cease payment of commission and/or overrides. Agents who libel, slander and/or attempt to induce or induce PPI or other insurance agents to transfer away from PPI or to not appoint through PPI and/or promote products through marketing organizations other than PPI to PPI agents will be terminated "with cause." Agents who have their own downline hierarchy may choose to market other products outside of PPI and to encourage their own direct agents to market plans as they may choose

COMMISSIONS AFTER TERMINATION

The Agent's rights to receive all commissions that may accrue on account of policies issued on applications secured by Agent or his sub-agents, if vested, shall be payable to the Agent upon termination of this Contract without cause, unless such commissions in any single month amount to less than \$50.00, in which case no further commissions shall be payable. If this Contract is terminated "with cause," as defined in this Contract, no further commissions or other compensation or allowance will be payable.

ERRORS AND OMISSIONS COVERAGE AND CERTIFICATION

The Agents agrees at time of initial contract with PPI to furnish satisfactory evidence of a sufficient level of Errors and Omissions coverage to secure the faithful performance of his duties. The Agent is also required to continuously maintain such coverage and is required to provide proof of this coverage upon demand by PPI. Agent also agrees to maintain all CMS/AHIP and company certification as may be required and will provide current documentation of such upon completion for Agent and each sub agent.

CLAIMS AND LITIGATION

The Agent has no authority to institute legal proceedings in the name of PPI or COs, nor shall he institute any legal proceedings in connection with the transaction of business on behalf of PPI unless such actions shall have been approved in advance by PPI. The Agent shall defend any act or alleged act of his own at his own expense and shall pay to PPI on demand any costs or expenses incurred by PPI should PPI be made a party to, have to answer, or defend any such suit because of the Agent's act or acts. However, PPI may, if not satisfied with the manner in which such defense is conducted, employ counsel to conduct the defense, and any expense thus incurred shall be paid by the Agent unless, in the judgment of PPI, the Agent is in no way at fault or responsible for such suit and PPI agrees in writing to bear the expenses of such litigation.

ARBITRATION VENUE STATED

Any suit between PPI and the Agent growing out of any transaction arising from, based on, or in any way connected with this Contract shall be instituted and tried by binding arbitration only in Greenville County, South Carolina. All the terms, provisions and conditions of this Contract shall be conducted according to the laws of South Carolina.

MODIFICATION

This Contract cannot be changed by any verbal promise or statement by any of the parties hereto, and no written modification or change shall bind PPI, unless it is signed by the President or Treasurer of PPI and expresses an intention to modify or change this Contract. This Contract supersedes any previous contract(s) with PPI.

CONFIDENTIALITY

The Agent understands and agrees that information including, but not limited to, agent lists, customer lists, marketing, software, training, and trade secrets are proprietary in nature and are owned by PPI. These lists and information are extremely confidential, and the Agent is expressly prohibited from disclosing any of the information contained therein to any third party and may use the lists and information only as authorized by PPI. Any disclosure or unauthorized use by the Agent will subject PPI to immediate and irreparable damage and, because such damages would be difficult to calculate, in addition to other rights and remedies available to PPI, PPI shall be entitled to injunctive relief to stop or prohibit such disclosure or unauthorized use from any court of competent jurisdiction. In addition, the Agent will forfeit any and all vesting rights as well as future renewals under this Contract.

VESTING

The Agent's commission will be Vested at 100% immediately. Vesting pertains to all comp including the remainder of first year comp and renewals. All comp that is paid by PPI is subject to the \$50 minimum monthly commission payment clause mentioned previously in this contract. This immediate vesting presumes all compliance with Federal, State, County and other regulatory guidelines. Manager overrides are vested for as long as they maintain contracting for themselves and their downline agents through PPI.

PPI BUSINESS

PPI may discontinue or withdraw from the Agent any policy plan and may fix commissions on any policy plan offered by PPI. PPI reserves the right without notice of liability to retire from any state or territory and at its discretion discontinue said policy plans.

SEVERABILITY

The invalidity or unenforceability of any provision(s) of this Agreement shall not affect the validity or enforceability of any other provision of this Agreement, which shall remain in full force and effect.

SECURITY

Agent agrees to abide by all HIPAA, Hi Tech, Privacy, and any/all other State and or Federal Regulatory Security guidelines regarding the preservation and privacy of PHI/PII and any other covered item not specifically referenced in this document. Agent is responsible for any costs and penalties resulting from any failure in these issues as well as for any costs borne by PPI as a result of their action or inaction.

DEFINITIONS

Where the words "representative", "person", or the pronouns "he", "him", or "his" are used in the Contract, they are intended to mean the Agent, whether the Agent is an individual, a partnership, or a corporation. Where the word "policy" is used herein, it also means "certificate" of insurance or membership agreement within a Sharable or Association health program. Where the word "commissions" is used, it means "first year and renewal commissions".

IN WITNESS WHEREOF, this Contract is executed in duplicate this _____ day of _____ (month), _____ (year), and when approved by an authorized officer of PEEK PERFORMANCE INSURANCE, INC., shall be effective for all purposes as of the aforesaid date.

Agent's Signature: _____

Print Agent's Name: _____

PPI Authorized Signature: _____

PERSONAL GUARANTY IF AGENT IS NOT SOLE PROPRIETOR (Required for all appointing as *Insurance Agencies*)

_____ (name), to induce PEEK PERFORMANCE INSURANCE, INC. to execute this Contract and in consideration therefore, the undersigned does hereby unconditionally guarantee performance by the legal entity and its Agents under this Contract. The undersigned waives all notices with respect to this Guaranty, including notice of any failure of the legal entity and its Agents to perform its obligations under this Contract or to pay when due any amount due hereunder. This Guaranty is unconditional and absolute.

Personal Guaranty Signature: _____ (L.S.)

Type to Sign

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | <u>Agent</u> | |
|-------------|--|---|---|---|
| | | | <u>1st Yr</u> | <u>Ren</u> |
| 2023 ACA | Aetna CVS Health* | AZ, CA^, MO, NJ^, VA | \$18.50 | \$18.50 |
| 2023 ACA | Aetna CVS Health* | FL | \$25.00 | \$25.00 |
| 2023 ACA | Aetna CVS Health* | DE, GA, IL, NV^, NC, TX | \$22.00 | \$22.00 |
| 2023 ACA | Ambetter* | FL, GA, PA^ | \$27.00 | \$27.00 |
| 2023 ACA | Ambetter* | IL, MI, NV^, TX | \$22.00 | \$22.00 |
| 2023 ACA | Ambetter* | AZ, IN, KS, MS, NJ^, NM^, NH, OH, TN | \$18.50 | \$18.50 |
| 2023 ACA | Ambetter* - On-Exchange Only | AR^ | \$16.50 | \$16.50 |
| 2023 ACA | Ambetter* - On-Exchange Only | LA, SC | \$27.00 | \$27.00 |
| 2023 ACA | Ambetter* - On-Exchange Only | NC, OK, WA^ | \$22.00 | \$22.00 |
| 2023 ACA | Ambetter* - On-Exchange Only | AL, KY^, MO, NE | \$18.50 | \$18.50 |
| 2023 ACA | AmeriHealth NJ* - OEP Advantage (PCPM) | NJ^ | \$18.00 | \$17.00 |
| 2023 ACA | AmeriHealth NJ* - OEP Local/Pref (PCPM) | NJ^ | \$5.25 | \$5.25 |
| 2023 ACA | AmeriHealth NJ* - SEP (PCPM) | NJ^ | \$5.25 | \$5.25 |
| 2023 ACA | Anthem* | CA ^ | \$12.25 | \$11.25 |
| 2023 ACA | Anthem* | CO ^ | 1 - 49 - \$6 50 - 99 \$10 100 - 199 \$12 200+ \$15 | 1 - 49 - \$6 50 - 99 \$10 100 - 199 \$10 200+ \$10 |

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | <u>Agent</u> | |
|-------------|----------------------------|------------------------|---------------|------------|
| | | | <u>1st Yr</u> | <u>Ren</u> |
| 2023 ACA | Anthem* | CT ^ | \$14.25 | \$13.25 |
| 2023 ACA | Anthem* | GA | \$17.25 | \$16.75 |
| 2023 ACA | Anthem* | IN | \$17.25 | \$16.75 |
| 2023 ACA | Anthem* | KY ^ | \$21.25 | \$20.25 |
| 2023 ACA | Anthem* | MO | \$17.25 | \$14.25 |
| 2023 ACA | Anthem* | ME | \$17.25 | \$16.75 |
| 2023 ACA | Anthem* | NH | \$19.50 | \$14.25 |
| 2023 ACA | Anthem* | NV ^ | \$17.25 | \$16.75 |
| 2023 ACA | Anthem* | NY ^ | N/A | N/A |
| 2023 ACA | Anthem* | OH | \$17.25 | \$16.75 |
| 2023 ACA | Anthem* - (PCPM) | VA | \$19.50 | \$18.50 |
| 2023 ACA | Anthem* | WI | \$17.25 | \$16.75 |
| 2023 ACA | Ascension* | IN, MI, KS, TX, TN | 4.25% | 4.25% |
| 2023 ACA | BCBS of AZ* | AZ | \$17.25 | \$16.75 |
| 2023 ACA | BCBS of SC* | Individual | \$18.00 | \$18.00 |
| 2023 ACA | BCBS of SC* | Family | \$46.00 | \$46.00 |
| 2023 ACA | BCBS of IL, OK, NM+ | IL, OK, NM^ | 2.250% | 0.750% |
| 2023 ACA | BCBS of MT+ | MT | \$5.25 | \$5.25 |
| 2023 ACA | BCBS of TN* | TN | \$9.25 | \$7.25 |
| 2023 ACA | BCBS of TX+ | TX - Blue Advantage | \$22.00 | \$22.00 |
| 2023 ACA | BCBS of TX+ | TX - My Blue Health | \$17.00 | \$17.00 |
| 2023 ACA | CareSource | GA, IA, KY^, OH | \$18.00 | \$18.00 |
| 2023 ACA | CareSource | IN, NC | \$22.00 | \$22.00 |
| 2023 ACA | CareSource | WV^ | \$17.50 | \$13.50 |
| 2022 ACA | Christus+ | TX, LA | 4.150% | 4.150% |

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | Agent | |
|-------------|---|-------------------|---------------|------------|
| | | | 1st Yr | Ren |
| 2023 ACA | Cigna* | AZ, IL | \$16.50 | \$16.50 |
| 2023 ACA | Cigna* | CO^ | \$18.50 | \$16.50 |
| 2023 ACA | Cigna* | GA, FL | \$24.00 | \$24.00 |
| 2023 ACA | Cigna* | IN | \$19.00 | N/A |
| 2023 ACA | Cigna* | KS, MO | \$13.50 | \$13.50 |
| 2023 ACA | Cigna* | MS | \$19.00 | \$19.00 |
| 2023 ACA | Cigna* | NC | \$22.00 | \$19.00 |
| 2023 ACA | Cigna* | PA^, TN, VA | \$18.50 | \$18.50 |
| 2023 ACA | Cigna* | SC | \$21.00 | N/A |
| 2023 ACA | Cigna* | TX | \$22.00 | N/A |
| 2023 ACA | Cigna* | UT | \$16.50 | \$14.50 |
| 2023 ACA | Friday Health+ | CO^ | \$19.00 | \$19.00 |
| 2023 ACA | Friday Health+ | GA | \$26.00 | \$26.00 |
| 2023 ACA | Friday Health+ | NC | \$22.00 | \$22.00 |
| 2023 ACA | Friday Health+ | NV^ | \$23.00 | \$23.00 |
| 2023 ACA | Friday Health+ | OK | \$21.00 | \$21.00 |
| 2023 ACA | Highmark (BCBS)* | DE, NY^, PA^, WV^ | \$18.50 | \$18.50 |
| 2023 ACA | Horizon (BCBS)* - OMNIA (PCPM) | NJ^ | \$16.00 | \$15.00 |
| 2023 ACA | Horizon (BCBS)* - Advantage (PCPM) | NJ^ | \$9.00 | \$8.75 |
| 2023 ACA | Independence (BCBS)* | PA^ | \$17.50 | \$17.00 |
| 2023 ACA | Medica+ | AZ, IA, NE, OK | \$16.50 | \$16.50 |
| 2023 ACA | Medica+ - (PCPM) | KS, MO | \$19.50 | \$19.50 |
| 2023 ACA | Medica+ | MN, ND, WI | \$13.50 | \$13.50 |
| 2023 ACA | Molina* | CA^, IL, KY^, TX | \$17.50 | \$18.50 |

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | <u>Agent</u> | |
|-------------|--------------------------|--|---------------|------------|
| | | | <u>1st Yr</u> | <u>Ren</u> |
| 2023 ACA | Molina* | FL | \$18.50 | \$18.00 |
| 2023 ACA | Molina* | ID | \$12.50 | \$13.50 |
| 2023 ACA | Molina* | MI | \$20.00 | \$21.00 |
| 2023 ACA | Molina* | MS | \$15.50 | \$16.50 |
| 2023 ACA | Molina* | NM^ | \$12.50 | \$18.50 |
| 2023 ACA | Molina* | OH, WI | \$13.50 | \$14.50 |
| 2023 ACA | Molina* | SC, UT | \$16.50 | \$17.50 |
| 2023 ACA | Oscar+ | AZ, IA, KS, MI, MO, NE, OK, PA^ | \$18.50 | \$18.50 |
| 2023 ACA | Oscar+ - (PCPM) | NJ^ | \$18.50 | \$18.50 |
| 2023 ACA | Oscar+ | FL, GA, IL, NC, TX | \$23.50 | \$23.50 |
| 2023 ACA | Oscar+ | OH, TN, VA | \$16.50 | \$16.50 |
| 2023 ACA | Oscar+ | CA^ | \$13.50 | \$13.50 |
| 2023 ACA | Priority Health* | MI | 4.250% | 3.250% |
| 2023 ACA | UnitedHealthcare* | AL, WA^ | \$14.25 | \$14.25 |
| 2023 ACA | UnitedHealthcare* | AZ, CO^, KS, MD, MI, MO, MS, OK, TN, VA | \$18.50 | \$18.50 |
| 2023 ACA | UnitedHealthcare* | FL | \$27.00 | \$27.00 |
| 2023 ACA | UnitedHealthcare* | GA, IL, LA, NC, OH, TX | \$22.00 | \$22.00 |

* Commissions paid by PPI, + Commissions Paid by Agility

^ State-exchange only: Must be certified in this state to get appointed and be compensated on sales.

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | Agent | |
|-------------|----------------|--------------|---------------|------------|
| | | | 1st Yr | Ren |

\$ amount ACA commissions are typically PMPM (Per Member Per Month) rates, unless noted as PCPM (Per Contract Per Month). % rates will be calculated from monthly premium. Some carriers/states may have a cap on the number of members per policy that will be paid commission.

The following carrier notes are provided for informational purposes and are subject to change without notice. Consult the official carrier documentation for most up to date information, as well as all terms and conditions. This is not an exhaustive list of all carrier notes, caps, exceptions, etc. **Aetna CVS:** Commissions payable to a max of 5 lives per policy. **Anthem:** CA, CO, IN, KY, MO, NH, NV, WI (no cap), CT & OH (commissions payable to max of 2 members per policy), GA (commissions payable to max of 5 members per policy), ME (commissions payable to max of 3 members per policy), VA (commissions payable to max of 1 members per policy). **Cigna:** 2023 commissions for applications 1-4 will be paid \$0 PMPM until the agent or agency reaches 5 medical applications. Rates shown are for Member/Spouse; Child rates are 50% of the rate shown; commissions will be paid for up to 4 children on the plan. **Highmark:** Commissions will be capped at 5 members per policy. *NOTE: Additional caps or requirements may apply per carrier guidelines and changes.*

Please note: Commissions and bonus schedules subject to change; carriers may modify commissions at any time and that PPI will adjust commissions accordingly should this happen.

ACA Commissions

| <u>Year</u> | <u>Company</u> | <u>State</u> | Agent | |
|-------------|----------------|--------------|---------------|------------|
| | | | 1st Yr | Ren |

This is a “generic level” grid. Your personal commission on one or more carriers might be higher or lower by agreement with Peek Performance and/or your manager. Agents understand and agree that adjustments to commission level changes may take a period of weeks before the carrier or other payment source would be able to place them in force. Adjustments, if necessary, will be made to future commissions only. In some cases a signed commission document may be required before changes can be made. Agents are appointed and paid by carriers except as noted on the grid (*Paid by PPI, +Paid by Agility). Company commissions may change from time to time and/or may require a level of production in order to maintain their current contract level. Many, if not all, of the health/ACA companies could modify commission rates at some point. The agent understands and agrees that PPI will make appropriate changes to agent level commissions as needed in these cases. Agents agree to comply with any PPI production and/or reporting requirements and with all carrier, State DOI and Federal CMS guidelines in order to remain eligible to receive ongoing commissions and renewals. A modest processing fee may be incurred for each commission paid on all non-direct commissions, as noted in your PPI Agent Agreement. All aspects of the PPI Agent Agreement are applicable to this commission grid. Some ACA companies may require a minimum organization size and production to attain certain commission levels. Please note that carriers may modify commissions at any time and that PPI will adjust commissions accordingly should this happen. Managers wishing to receive compensation must assist in getting their downline agents to sign GA Agreement, the commission and hierarchy documents.

Unless otherwise authorized by Allstate Health Solutions (AHS), this Commission and Product Schedule ("Schedule") applies to all policies issued and paid on or after May 30, 2022:

| Products | | Commission Rates | | |
|------------------------------|--|--|---------|-------|
| | | (% of total Original Premium) | | |
| | | First Year | Renewal | |
| Simplified Issue | STM & Association & TrioMed | Standard Association STM (14960, PPO 5000, TX 5004) | 14.00% | N/A |
| | | TrioMED (14939) | 20.00% | 1.00% |
| | | -LIFE Association C (14996)* | 20.00% | 1.00% |
| | STM & Association | Standard Association STM (14960, PPO 5000, TX 5004) | 14.00% | N/A |
| | | -LIFE Association C (14956)* | 14.00% | N/A |
| | STM Individual (Optional Association) | Standard Individual (14275, PPO 5001) | 14.00% | N/A |
| | | -LIFE Association C (14956)* | 14.00% | N/A |
| | STM & Association (where applicable)in the following states: CT, IA, MD, MO, NC, ND, OR, SD, NE | | 13.00% | N/A |
| | STM & Association (where applicable)in the following states - KS, UT, VA | | 11.50% | N/A |
| | STM & Association (where applicable)in the following states - IN, OH | | 9.00% | N/A |
| Renewable PPO | STM & Association & TrioMed | Standard Association STM (PPO 5000, TX 5004) | 16.00% | 7.00% |
| | | TrioMED (14939) | 20.00% | 1.00% |
| | | -LIFE Association C (14996)* | 20.00% | 1.00% |
| | STM & Association | Standard Association STM (PPO 5000, TX 5004) | 16.00% | 7.00% |
| | | -LIFE Association C (14956)* | 16.00% | 7.00% |
| | STM Individual (Optional Association) | Standard Individual (PPO 5001) | 16.00% | 7.00% |
| | | -LIFE Association C (14956)* | 16.00% | 7.00% |
| | STM & Association (where applicable)in the following states - IA, NE | | 15.50% | 6.00% |
| | STM & Association (where applicable)in the following states - KS, UT | | 14.00% | 4.50% |
| | STM & Association (where applicable)in the following states - IN | | 11.50% | 2.25% |
| Guaranteed Issue | STM & Association & TrioMed | Guaranteed Issue Association STM (14961, PPO 5002) | 7.00% | N/A |
| | | TrioMED (14939) | 20.00% | 1.00% |
| | | -LIFE Association C (14996)* | 20.00% | 1.00% |
| | STM & Association | Guaranteed Issue Association STM (14961, PPO 5002) | 7.00% | N/A |
| | | -LIFE Association C (14956)* | 7.00% | N/A |
| | STM Individual (Optional Association) | Guaranteed Issue Individual (14347, PPO 5003, TX 5006) | 7.00% | N/A |
| -LIFE Association C (14956)* | | 7.00% | N/A | |

| Products | | Commission Rates | |
|------------------------------------|---|-------------------------------|---------|
| | | (% of total Original Premium) | |
| | | First Year | Renewal |
| Fixed Benefit & Association & Trio | Foundation Health (15948) | 21.00% | 3.00% |
| | Allstate Health Access Plan (27873) | 21.00% | 3.00% |
| | Allstate Health Access Plan GI Plan (27876) | 10.50% | 1.50% |
| | Health Expense Protection (16803) | 21.00% | 3.00% |
| | Hospital Expense Protection Plus - Ind (5024) | 21.00% | 3.00% |
| | TrioMED (14939) | 20.00% | 1.00% |
| | -LIFE Association C (14996)* | 20.00% | 1.00% |
| Fixed Benefit & Association | Foundation Health (15949) | 21.00% | 3.00% |
| | -LIFE Association C (14956)* | 21.00% | 3.00% |
| | Allstate Health Access Plan (27875) | 21.00% | 3.00% |
| | -LIFE Association C (14956)* | 21.00% | 3.00% |
| | Allstate Health Access Plan GI Plan (27874) | 10.50% | 1.50% |
| | -LIFE Association C (14956)* | 10.50% | 1.50% |
| | Health Expense Protection (16804) | 21.00% | 3.00% |
| | -LIFE Association C (14956)* | 21.00% | 3.00% |
| | Hospital Expense Protection Plus - Assoc (5023) | 21.00% | 3.00% |
| | -LIFE Association C (14956)* | 21.00% | 3.00% |
| -LIFE Association C (14956)* | 21.00% | 3.00% | |
| Ancillary Products | TrioMED (14959) | 20.00% | 1.00% |
| | -LIFE Association B (14995) | 20.00% | 1.00% |
| | Dental PPO (15550) | 24.00% | 1.50% |
| | Dental Select (29304) | 25.00% | 1.00% |
| My LIFE Wellness | | 25.00% | 25.00% |

*Compensation payable on the one-time enrollment fee is \$5.00 (Life Association C 14996/14956)

Schedule of Terms and Conditions

This Commission and Product Schedule shall apply to all policies issued and paid on or after the effective date set forth above, or otherwise approved by Allstate Health Solutions (“AHS”). Products set forth on this Schedule are issued and underwritten by National Health Insurance Company, Integon National Insurance Company, and/or Integon Indemnity Corporation (hereafter collectively the “Products”).

1. Definitions

- a. *First Year* means the commission rate applicable to the first 12 months a Product is in-force. For this purpose, if a Product is reissued to cover the same insured individual(s) on the same terms (other than effective date), such a reissuance will be considered the same Product for purposes of calculating the 12-month period.
 - b. *Commissionable Premium* means the actual premium charged.
 - c. *Renewal* means the commission rate applicable following the first 12 months a Product is in-force, and for which First Year rates are not applicable.
2. Base commission will be calculated by multiplying the amount of the Commissionable Premium received by the commission rate determined under this Schedule.
 3. Commission will be payable only for premium which is received from the insured and retained by AHS.
 4. The LIFE Association membership is not an insurance product. Any compensation paid on the Association Product is a marketing fee and will be paid in addition to any applicable commission.
 5. AHS reserves the right to determine the commission rate on replacement business. For purposes of this Schedule, “replacement” shall mean the substitution of insurance or other coverage under one AHS Product for insurance or coverage under another AHS Product.

Allstate Health Solutions is a marketing name for products underwritten by National Health Insurance Company, Integon National Insurance Company, Integon Indemnity Corporation and American Heritage Life Insurance Company.
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6. AHS may set commission rates for a AHS form number or Product not shown on the Schedule.
7. If AHS is paying Agency's Writing Agents, Agency is responsible for communicating the applicable commission to its Writing Agents and the applicable terms of the commission payments.
8. AHS reserves the right to revise or discontinue the Schedule as is deemed appropriate, and to determine the clarifications of policies for compensation purposes. Other schedules may apply in certain other circumstances, such as where state mandates, special plans or agreements are in effect.
9. Payments made pursuant to this Schedule shall be paid to the Agency, unless otherwise agreed to by Agency and AHS. Agency shall have one hundred eighty (180) days from the date that a commission payment is received to dispute the method of calculation and/or the amount of such payment. Disputes respecting compensation shall be subject to decision and settlement by AHS's decision shall be final and binding upon the parties involved.
10. Notwithstanding anything herein to the contrary, AHS reserves the right to stop paying commissions to the extent total commission payments fall below \$650 in any consecutive 12 month period.

Advanced Commissions

AHS may, at its option, advance commissions to Agency or agent in anticipation of commissions to be earned by Agency or agent. If allowed, the following apply:

1. If a policy lapses during the first year and the commission has been advanced, the unearned commission will be charged to agent or Agency's account and will represent a commission debit balance owed AHS. AHS may, at any time, apply any and all commissions earned by agent or Agency to the repayment or any commissions previously advanced to agent or Agency, or to the repayment of any commission debit balance that has been incurred.
2. Agency and /or agent agrees that any and all amounts so advanced pursuant to this Schedule will, for all purposes, be deemed direct loans to agent or Agency for the repayment of which agent will be personally liable. Upon request, agent agrees to execute and deliver to AHS such promissory notes to evidence agent's indebtedness to AHS.
3. AHS may demand repayment of any debit balance at any time. Agent and Agency agree that in the event it refuses to pay any indebtedness within thirty (30) days of written demand, AHS is entitled to interest on the unpaid balance from the date written demand was made, in addition to all other legal remedies available.
4. In its sole discretion, AHS may elect to revise or discontinue such advances of commission at any time.

Unless otherwise authorized by Allstate Health Solutions (AHS), this Commission and Product Schedule (“Schedule”) applies to all policies issued and paid on or after January 18, 2021.

| Tier 1 - Annualized Premium | \$0+ | |
|---|-----------------------------------|---------|
| | Commission Rates | |
| | (% of total Original Premium) | |
| | First Year | Renewal |
| Accident Fixed-Benefit & Accident Medical Expense | 40.00% | 6.00% |
| Dental Indemnity | 25.00% | 5.00% |
| Term Life – Critical Illness | 70.00% | 6.00% |
| Cancer & Heart/Stroke | 45.00% | 6.00% |
| Cancer & Heart/Stroke – CO, FL, MN & MI | 40.00% | 5.00% |
| Other Riders | Same as policy to which attached. | |

Schedule of Terms and Conditions

This Commission and Product Schedule shall apply to all policies issued and paid on or after the effective date set forth above, or otherwise approved by Allstate Health Solutions (“AHS”). Products set forth on this Schedule are issued and underwritten by National Health Insurance Company, Integon National Insurance Company, and/or Integon Indemnity Corporation (hereafter collectively the “Products”).

1. Definitions

- a. *First Year* means the commission rate applicable to the first 12 months a Product is in-force. For this purpose, if a Product is reissued to cover the same insured individual(s) on the same terms (other than effective date), such a reissuance will be considered the same Product for purposes of calculating the 12-month period.
 - b. *Commissionable Premium* means the actual premium charged.
 - c. *Renewal* means the commission rate applicable following the first 12 months a Product is in-force, and for which First Year rates are not applicable.
2. Base commission will be calculated by multiplying the amount of the Commissionable Premium received by the commission rate determined under this Schedule.
 3. Commission will be payable only for premium which is received from the insured and retained by AHS.
 4. The LIFE Association membership is not an insurance product. Any compensation paid on the Association Product is a marketing fee and will be paid in addition to any applicable commission.
 5. AHS reserves the right to determine the commission rate on replacement business. For purposes of this Schedule, “replacement” shall mean the substitution of insurance or other coverage under one AHS Product for insurance or coverage under another AHS Product.
 6. AHS may set commission rates for a AHS form number or Product not shown on the Schedule.
 7. If AHS is paying Agency’s Writing Agents, Agency is responsible for communicating the applicable commission to its Writing Agents and the applicable terms of the commission payments.
 8. AHS reserves the right to revise or discontinue the Schedule as is deemed appropriate, and to determine the clarifications of policies for compensation purposes. Other schedules may apply in certain other circumstances, such as where state mandates, special plans or agreements are in effect.
 9. Payments made pursuant to this Schedule shall be paid to the Agency, unless otherwise agreed to by Agency and AHS. Agency shall have one hundred eighty (180) days from the date that a commission payment is received to dispute the method of calculation and/or the amount of such payment. Disputes respecting compensation shall be subject to decision and settlement by AHS’s decision shall be final and binding upon the parties involved.
 10. Notwithstanding anything herein to the contrary, AHS reserves the right to stop paying commissions to the extent total commission payments fall below \$650 in any consecutive 12 month period.

Advanced Commissions

AHS may, at its option, advance commissions to Agency or agent in anticipation of commissions to be earned by Agency or agent. If allowed, the following apply:

1. AHS will charge a 3% fee in exchange for advancing commissions as set forth herein (advanced commissions x 3% = one-time fee per policy). Such fee shall be deducted from the advanced amount.
2. If a policy lapses during the first year and the commission has been advanced, the unearned commission will be charged to agent or Agency's account and will represent a commission debit balance owed AHS. AHS may, at any time, apply any and all commissions earned by agent or Agency to the repayment or any commissions previously advanced to agent or Agency, or to the repayment of any commission debit balance that has been incurred.
3. Agency and /or agent agrees that any and all amounts so advanced pursuant to this Schedule will, for all purposes, be deemed direct loans to agent or Agency for the repayment of which agent will be personally liable. Upon request, agent agrees to execute and deliver to AHS such promissory notes to evidence agent's indebtedness to AHS.
4. AHS may demand repayment of any debit balance at any time. Agent and Agency agree that in the event it refuses to pay any indebtedness within thirty (30) days of written demand, AHS is entitled to interest on the unpaid balance from the date written demand was made, in addition to all other legal remedies available.
5. In its sole discretion, AHS may elect to revise or discontinue such advances of commission at any time.

Writing Agent Compensation

1. If Agency's Writing Agents are being paid directly, Agency is responsible for communicating the applicable Schedule Option to its Writing Agents and any change in such option. Agency is also responsible for communicating to Writing Agents the applicable terms of compensation payments set by AHS herein.
2. Any Writing Agents Agency has authorized to receive compensation payments directly from AHS, as identified pursuant to Section A, shall be paid compensation pursuant to the Schedule Option selected by Agency below. Unless otherwise authorized by AHS, the Writing Agent Schedule Option applies to all policies issued and paid on or after January 13, 2017.

| Writing Agent Product Schedule | | | | |
|--|----------------------------------|-------------------|----------------------------|----------------|
| There are 3 First Year and 3 Second Year Plus options to choose from. You may combine them to suit your needs. For example, once you pick the appropriate First Year Rate (Option H, I or J), you can then combine it with Option L, K or J for the Second Year Plus. Subtract the Producer rates from your General Agent rate to calculate your override. | | | | |
| Supplemental Coverage – Stand Alone and Integrated | | | | |
| Plan | Compensation Option | First Year | Compensation Option | Renewal |
| Accident Fixed-Benefit & Accident Medical Expense | H | 20% | L | 3% |
| | I | 30% | K | 5% |
| | J | 40% | J | 6% |
| Dental | H | 13% | L | 3% |
| | I | 19% | K | 4% |
| | J | 25% | J | 5% |
| Term Life – Critical Illness | H | 35% | L | 3% |
| | I | 53% | K | 5% |
| | J | 70% | J | 6% |
| Cancer & Heart/Stroke | H | 23% | L | 3% |
| | I | 34% | K | 5% |
| | J | 45% | J | 6% |
| Cancer & Heart/Stroke CO, FL, MN & MI | H | 20% | L | 2% |
| | I | 30% | K | 3% |
| | J | 40% | J | 5% |
| Other Riders | Same as policy to which attached | | | |