Society of FSP™
Financial Service Professionals

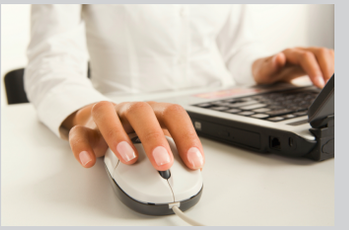
CalSurance®
800-745-7189
M-F 7:00 AM - 5:00 PM PST
681 S. Parker St., Suite 300
Orange, CA 92868

Welcome to the Group Sponsored Errors & Omissions program designed exclusively for the Society of Financial Services Professionals Member Agents & Agencies

Here are just a few of the features of this top rated E&O Program:

- Privacy Protection (Cyber) Endorsement Available for Individual Agents
- Multiple Coverage Options Available - purchase only what you need
- Defense Costs are Outside the Limit!
- Retroactive Date - Date of Agent's first continuously maintained Life Agents E&O Policy
- Additional Enhancements:
  - Network Risk & Privacy Claim Endorsement
  - Premium Financing Carveback subject to $10,000,000 maximum death benefit
  - Insolvency carveback for Insurance Companies rated B++ or better by A.M. Best

Enroll Online Today at:
www.calsurance.com/societyfsp



Should you have any questions about this program, please call or email us at:
Phone: (800) 745-7189 or info@calsurance.com

The coverage is underwritten by Continental Casualty. A.M. Best rated A: XV*. Please review the attached materials for program terms & conditions.

*The information obtained from A.M. Best dated July 11, 2019 is not in any way CalSurance Associate's warranty or guaranty of the financial stability of the insurer in question, and that the information is current only as of the date of the publication.

CalSurance Associates, A Division of Brown & Brown Program Insurance Services, Inc. Domiciled in California, CA License #0B02587
For Agents Use Only. Coverage subject to the complete Terms and Conditions of the Policy.

Insurer:
Continental Casualty Company
Rated A: XV (Excellent) by A.M. Best.

The information obtained from A.M. Best effective July 11, 2019, in any way CalSurance Associate's warranty or guaranty of the financial stability of the insurer in question, and that the information is current only as of the date of the publication.

Claims Administration:
Lancer Claims Services
A Division of Brown & Brown Program Insurance Services, Inc.

Named Insured:
Member Agents & Agencies of The Society of Financial Service Professionals (FSP) in good standing who have paid the premium and whose names are on file with the insurer.

Insured:
Insured means:

1. an Agent or General Agent;

2. a Registered Representative of any Broker/Dealer but solely for those Professional Services defined under paragraph B. 1. of the definition of Professional Services.

3. a natural person who is a former or current secretarial, clerical or administrative employee of the Agent, General Agent, Registered Representative or Registered Investment Adviser listed in paragraphs 1. and 2. above but solely for services performed within their capacity as such and on behalf of such Agent, General Agent, Registered Representative or Registered Investment Adviser, provided such natural person did not receive any commission income pursuant to an agent, broker or registered representative contract with any insurance company or broker/dealer as a result of providing Professional Services offered by the Agent, General Agent, Registered Representative or Registered Investment Adviser.

Limit of Liability Options:
$1,000,000 per Claim/$1,000,000 aggregate each Agency; or
$2,000,000 per Claim/$2,000,000 aggregate each Agency.

Note: $1,000,000 sub-limit applies to Claims involving Coverage Level III products, regardless of limit elected.

Policy aggregate is $50,000,000

Claims Expenses:
In addition to the Limits of Liability

Deductibles:
(Applies to Loss and Claims Expenses)

Level I: $ 1,000 Each Per Agent – Insurance Products (except P&C Products)
$ 1,000 Per Agent Outside Business

Level II: $ 1,000 Each Per Agent – Insurance Products (except P&C Products)
$ 5,000 Per Registered Representative – Mutual Funds/Variable Products
$ 1,000 Per Agent Outside Business

Level III: $ 1,000 Each Per Agent – Insurance Products (except P&C Products)
$ 5,000 Per Registered Representative – Mutual Funds/Variable Products
$ 1,000 Per Agent Outside Business
$10,000 Per P&C Agent (All P&C Products)
$10,000 Per Registered Representative – Securities Approved by a Broker Dealer

Duty to Defend:
Yes, to those Claims for which coverage applies.
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Territory:
Worldwide; Claim must be brought in U.S., its territories and possessions, Puerto Rico or Canada.

Limited Insolvency Coverage:
Applicable to:

- Admitted Property Casualty Insurance Companies with an A.M. Best rating of B++ or better at the time the Wrongful Act occurred;

- Admitted Life/A&H Insurance Companies with an A.M. Best rating of B++ or better at the time the Wrongful Act occurred; and

- Non-admitted insurance companies authorized to conduct business in the applicable state rated A- or better by A.M. Best; or Product Provider that was guaranteed or operated by a governmental body (bodies), including but not limited to: assigned risk plans, Joint Underwriting Associations or fair plans; at the time the Wrongful Act occurred.

Retroactive Date:

A. With respect to an Agent or General Agent:
   a. the date the Agent or General Agent became continuously insured without interruption under any claims made professional liability policy (subject to written proof of such coverage at the time the Insured gives written notice to the Insurer of a Claim under this Policy); or
   b. the Prior Acts Date or Retroactive Date shown on the Agent's or General Agent's Errors & Omission Liability Policy:
      i. which immediately preceded the first American Automobile Insurance Company Policy issued to the Agent or General Agent; or
      ii. which immediately preceded the date the Agent or General Agent was first added to the American Automobile Insurance Company Policy, if the Agent or General Agent was added after the inception date of the first American Automobile Policy.

B. With respect to a Registered Representative, the date the Registered Representative became continuously insured without interruption under any claims made professional liability policy (subject to written proof of such coverage at the time the Insured gives written notice to the Insurer of a Claim under this Policy).

Extended Reporting Period (ERP):

1. In the event of expiration of a valid membership between the Sponsoring Company and an Insured member Agent, 1 year;
2. If the Agent is deceased, his or her estate, or if the Agent is totally and permanently disabled or retired from providing Professional Services, unlimited period.

Professional Services:

A. The sale, attempted sale or servicing of:
   Coverage Level I:
   1. Life Insurance (other than Variable Life Insurance products);
   2. Accident and Health Insurance;
   3. Disability Income Insurance;
   4. Fixed Annuities including individual Retirement Annuities;
   5. Group Employee Benefit Plans, Life, Accident & Health Plans or Disability Plans, provided such Plans are fully insured at all times (but not including Group or Ordinary Pension, or Profit Sharing Plans, Individual Retirement Accounts, Keogh Plans, 401(k) or 501(b) Plans); or

   Coverage Level II adds:
   6. Variable Products (including Equity Indexed Annuities and Variable Life);
   7. Mutual Funds registered with the Securities and Exchange Commission;
   8. Employee Benefit Plans (other than Multiple Employer Welfare Arrangements) including, but not limited to,

Professional Services (continued):

   Group Plans, Group or Ordinary Pension or Profit Sharing Plans, Keogh Plans, 401(k) or 501(b) Plans, or Retirement Annuities.

   Coverage Level III (available online only) adds:
   9. any Security approved by a Broker/Dealer;
   10. Property and Casualty Insurance Products;

   Solely with respect to Level III Products, a sub-limit of $1,000,000 applies regardless of the limit elected.

B. Administration of Employee Benefit Plans:

C. Assisting a **Client** in obtaining premium financing for any insurance policy listed in paragraph A. above provided that the actual premium financing is provided by an entity that is not affiliated with any **Insured** and provided that, in case of a life insurance company the death benefits of such life insurance policy are $10,000,000 or less.

D. financial planning activities in conjunction with services described in paragraph A. above, whether or not a separate fee is charged.

E. the supervision, management and training of an Agent by a General Agent or Agency/Agency Staff with respect to activities otherwise covered by this Policy.

F. expert witness testimony.

G. Services as a notary public.

Exclusions (including, but not limited to):

The Insurer shall not be liable to pay any **Loss** in connection with any **Claim**:

A. **Prior Litigation**
based upon, directly or indirectly arising out of, or in any way involving facts alleged in any litigation against the **Insured** pending on or prior to the inception date of this Policy, or renewal thereof;

B. **Prior Wrongful Acts of Broker/Dealers**

based upon, directly or indirectly arising out of, or in any way involving any actual or alleged **Wrongful Acts** or **Interrelated Wrongful Acts** by, or liability of, any **Broker/Dealer** acquired by an **Insured**, where such **Wrongful Acts** or **Interrelated Wrongful Acts** were committed, attempted, or allegedly committed or attempted prior to such acquisition;

C. **Claims by Specified Persons or Entities**
by or on behalf of, or for the benefit of, whether directly or indirectly,
1. any parent, spouse, **Domestic Partner**, or child of the **Insured**
2. an entity in which one or more **Insureds**, at the time of the **Wrongful Act** giving rise to a **Claim**:
   i. had a total of ten percent (10%) or more equity interest, or
   ii. operated, controlled, or managed;
3. an individual or entity which has, or did have at the time of the **Wrongful Act**, a total of ten percent (10%) or more equity interest in an entity **Insured** or operates, controls or manages an entity **Insured**;
4. any past or present **Insured**, whether it be an individual, class or derivative action, except and to the extent that such **Claim** is by an **Insured** in his or her capacity as a **Client**;
5. any clearing agency or arising out of any function of any **Insured** as a clearing agency;
6. any **Broker/Dealer** other than one which buys, sells or trades in securities exclusively as a principal for its own account;
7. any governmental or quasi-governmental official or agency, including but not limited to any state or federal securities or insurance commission or agency, in any capacity; however, this exclusion shall not apply subject to the Insurer's maximum Limit of Liability of $25,000 for all **Loss** for all such **Claims** made against an **Insured**, which amount shall be part of and not in addition to the amount set forth in Item 6. of the Declarations. Notwithstanding anything in the Policy to the contrary, the applicable retention amount for all such **Claims** shall be $0;
8. any self-regulatory organization including, but not limited to, the Securities and Exchange Commission, the Financial Industry Regulatory Authority, the Securities Investor Protection Corporation, in any capacity; however, this exclusion shall not apply subject to the Insurer's maximum Limit of Liability of $25,000 for all **Loss** for all such **Claims** made against an **Insured**, which amount shall be part of and not in addition to the amount set forth in Item 6. of the Declarations. Notwithstanding anything in the Policy to the contrary, the applicable retention amount for all such **Claims** shall be $0;

provided, however, that paragraphs 7. and 8. above shall not apply to any Claim by an official of such agency or organization if such official is bringing the Claim in his or her capacity as a direct Client of an Insured and not as an official of such agency or organization;

D. **Intentional Acts**
based upon, directly or indirectly arising out of, or in any way involving any actual or alleged dishonest, fraudulent, criminal, malicious, purposeful or intentional act, error or omission, or any actual or alleged willful violation of any statute or law as determined in fact by any trial court verdict, court ruling, regulatory ruling or legal admission;

For purposes of determining the applicability of this exclusion:
1. the facts pertaining to and knowledge possessed by any natural person Insured shall not be imputed to any other natural person Insured; and
2. only facts pertaining to and knowledge possessed by any executive officer shall be imputed to an Insured entity;

E. **Bodily Injury/Property Damage**
based upon, directly or indirectly arising out of, or in any way involving any actual or alleged bodily injury, sickness, disease, emotional distress, mental anguish or death of any person, or damage to or destruction of any tangible property, including loss of use thereof;

F. **Contractual Liability/Promises/Guarantees**
based upon, directly or indirectly arising out of, or in any way involving actual or alleged
1. liability of others assumed by an Insured under any contract or agreement; provided, however, that this paragraph shall not apply to the extent that the liability would attach to an Insured in the absence of such contract or agreement; or
2. making or stating of any promises or guarantees as to interest rates or fluctuations in interest rates, the market value of any investment or insurance product, or future premium payments.

G. **Specified Services**
based upon, directly or indirectly arising out of, or in any way involving actual or alleged:
1. performance of or failure to perform services by the **Insured** as:
   a. an actuary, accountant, attorney, property or casualty agent, real estate agent, or third party administrator; or
   b. a market maker or specialist in any securities; or
2. tax advice provided by the Insured except to the extent that such tax advice is an incidental part of the Professional Services being rendered;
3. the ownership, creation, formation, operation or administration of, the adjustment of or administration of claims for:
   a. Any health maintenance organization or other provider organization
   b. Any pool, syndicate, association or other combination formed for the purpose of providing insurance or benefits; or
   c. Any risk retention group, captive or self-insurance program.

H. **Premium/claim/tax monies**
based upon, directly or indirectly arising out of, or in any way involving:
1. the Insured's inability or refusal to pay or collect premium, claim or tax monies; or
2. dispute over fees, commissions or charges, including without limitation the structure of fees or excessive fees; however, this paragraph 2. shall not apply to surrender charges;

I. **Commingling/Illegal Profit**
based upon, directly or indirectly arising out of, or in any way involving:
1. any actual or alleged commingling or use of Client funds; or
2. any actual or alleged profit, remuneration or pecuniary advantage gained by any Insured, to which the Insured was not legally entitled;

as determined by a final adjudication in the underlying action or in a separate action or proceeding

J. **Insolvency**
based upon, directly or indirectly arising out of, or in any way involving the insolvency, receivership, conservatorship, liquidation, bankruptcy or inability to pay of a natural person, entity, benefit plan, insurance company, managed health care organization, reinsurer, risk retention group or captive (or any self insurance plan or trust by whatsoever name), or limited partnership in which the Insured has placed business or obtained insurance coverage, or placed or recommended placement of the funds of a **Client**; however, this exclusion shall not apply if such **Claim** arises from the **Insured's** placement of coverage with a life or health insurance company with an A.M. Best financial strength rating of "B++" or a Property and Casualty insurance company with an A.M. Best financial rating of "B++" or better at the time of placement.

K. **Employee Benefit Plans**
based upon, directly or indirectly arising out of, or in any way involving:
1. any actual or alleged pension, profit sharing, health and welfare or other employee benefit plan or trust sponsored by the **Insured** or any entity owned or controlled by the **Insured** or in which the **Insured** is a participant, trustee or named fiduciary, as defined under the Employee Retirement Income Security Act of 1974, as amended, or any similar common or statutory law; or
2. the actual or alleged design of any employee benefit plan;

L. **Sale or Servicing of Certain Products**
based upon, directly or indirectly arising out of, or in any way involving the actual or alleged sale, attempted sale or servicing of any
1. coverage, alleged coverage or plan placed with any form of Multiple Employer Welfare Arrangement as defined by the Employee Retirement Income Security Act of 1974, as amended, or any employee benefits plan involving self funding in whole or in part, by any employer, union, or employment related entity;
2. products or services not approved by the **Broker/Dealer** with whom the **Insured** was contracted at the time of the sale or servicing;
3. commodities, commodities futures contracts, or any type of option contract with the exception of covered call writing;
4. promissory notes;
5. ETS pay phone investments or other similar type investments;
6. viatical settlements, viatical insurance benefits, viatical investment pools or any security backed by viatical settlements;
7. "Stranger Originated Life Insurance (STOLI)" or "Speculator Initiated Life Insurance (SPINLIFE);"

8. Structured settlements, structured notes, principal protected notes, or reverse convertible notes;
9. Life Settlements; Reverse mortgages or similar transactions in which the present value of a conditional contract is exchanged or sold;
10. issuer callable certificates of deposit and/or equipment sale-lease-buy-back transactions of any kind; or
11. Leveraged or Inverse Products, including but not limited to Exchange Traded Funds or Mutual Funds, or Exchange Traded Notes;

M. Discretionary Authority
based upon, directly or indirectly arising out of, or in any way involving any actual or alleged activities in connection with the exercise of discretionary authority with regard to the management or disposition of assets (whether for individuals, groups, employee benefit plans, or other entities of whatever legal form or character); however, this exclusion shall not apply to the activities of the **Insured** when exercising discretionary authority as a **Registered Investment Adviser**

N. **Nuclear/Pollution**
based upon, directly or indirectly arising out of, or in any way involving:
1. any nuclear reaction, radiation or contamination; or
2. any actual, alleged or threatened discharge, release, escape, or disposal of, or exposure to, Pollutants; any request, direction or order that any of the Insureds test for, monitor, clean up, remove, contain, treat, detoxify, neutralize or in any way respond to or assess the effect of Pollutants or nuclear reaction, radiation or contamination, or any voluntary decision to do so; or any actual or alleged property damage, or bodily injury, sickness, disease or death of any person, or financial loss to the Insureds, their security holders, or their creditors resulting from any of the aforementioned matters;

O. Anti-trust
based upon, directly or indirectly arising out of, or in any way involving actual or alleged price fixing, price discrimination, predatory pricing, restraint of trade, antitrust, monopolization, unfair trade, or unfair anti-competitive conduct; however, the knowledge of any such act by any **Insured** individual shall not be imputed to any other **Insured** individual; and only such knowledge of an executive officer shall be imputed to an **Insured** entity.

P. Confidential or non-public information
based upon, directly or indirectly arising out of or in any way involving the actual or alleged use, misuse or disclosure of:
1. confidential information, including but not limited to such use for the purpose of replacement of coverage; or
2. non-public information in a manner prohibited by the laws of the United States, including, but not limited to, the Insider Trading and Securities Fraud Enforcement Act of 1988, Section 10(b) of the Securities Exchange Act of 1934 and Rule 10b-5 thereunder, any similar laws of any other jurisdiction, or any rules or regulations promulgated under any of the foregoing, all as amended;

Q. Unlicensed entity
based upon, directly or indirectly, arising out of or in any way involving the placement of a **Client's** coverage or funds directly or indirectly with any organization, entity or vehicle of any kind, nature or structure which is not licensed to do business in the state or jurisdiction with authority to regulate such business; however, this Exclusion shall not apply to any **Claim** arising from or contributed to by the placement of a **Client's** coverage or funds directly or indirectly with such organization, entity or vehicle which is an eligible surplus lines insurer in the state or jurisdiction with authority to regulate such business;

R. Broker/Dealer as Successor in Interest
based upon, directly or indirectly arising out of or attributable to the **Insured Broker/Dealer** acting as a successor in interest to another entity, including but not limited to another securities broker/dealer;

S. Investment Banking Activities
based upon, directly or indirectly arising out of, or in any way involving any actual or alleged underwriting, syndicating, or investment banking work, or associated counseling or investment activities, including but not limited to, any aspect of any actual, attempted or threatened mergers, acquisitions, divestitures, tender offers, proxy contests, leveraged buy-outs, going private transactions, reorganizations, capital restructuring, recapitalization, spin-offs, primary or secondary offerings of securities (regardless of whether the offering is a public offering or a **Private Placement**), other efforts to raise or furnish capital or financing for any enterprise or entity or any disclosure requirements in connection with any of the foregoing; provided, however, that this exclusion shall not apply to **Claims** arising from sales by an **Insured** of securities in connection with an offering thereof where such Claims relate solely to conduct by the Insured detrimentally relied upon by particular clients of the **Insured Broker/Dealer** and do not arise from facts or circumstances affecting the offering generally such as, but not limited to, actual or alleged misrepresentations or omissions in the formal written offering materials, including registration statements, offering memoranda and circulars;

T. **Securities below Minimum Capitalization Levels**
based upon, directly or indirectly arising out of, or in any way involving any security issued by an entity unable to meet the minimum capitalization and other standards for listing and maintenance on the NASDAQ SmallCap Market;

U. **Owned funds or investment products**
based upon, directly or indirectly arising out of, or in any way involving any proprietary fund or investment products in which an **Agent or General Agent or Registered Representative** has any ownership interest;

V. **Investment in Specified Securities or Funds**
based upon, directly or indirectly arising out of, or in any way involving the use of or investment in:
1. any security that is not registered with the Securities and Exchange Commission; however, this Exclusion shall not apply to securities which are both exempt from registration with the Securities and Exchange Commission and approved by the **Broker/Dealer** with whom the **Insured** had a contract with at the time of the sale of the security; or
2. any hedge fund, whether it is registered or not with the Securities and Exchange Commission, unless specifically endorsed onto the Policy.

W. **Alternative Investments**
based upon, directly or indirectly arising out of, or in any way involving the use of or investment in any **Alternative Investment**, issuer callable certificates of deposit, equipment sale-lease-buy-back transactions of any kind and/or any security that is not registered with the Securities and Exchange Commission;

X. **Fiduciary Services**
based upon, directly or indirectly arising out of, or in any way involving investment advice provided by a:
a. Fiduciary Adviser if such investment advice is not provided pursuant to and in accordance with all of the requirements of the Pension Protection Act of 2006 as it may be amended; or
b. Fiduciary Adviser pursuant to section 3(38) of the Employee Retirement Income Security Act of 1974, as amended, or any similar common or statutory law.

Y. **Wrongful Employment Practices**
based upon, directly or indirectly arising out of, or in any way involving employment practices including but not limited to discrimination or termination of employment.

Z. **Class Actions**
brought by one party, or a group of parties, as representatives of a larger class including any **Claim** brought in federal court that is governed by Federal Rule of Civil Procedure 23.

AA. **412/419 Plan Exclusion**
The Insurer shall not be liable to pay any Loss in connection with any Claim:
- based upon directly or indirectly arising out of, or in any way involving the sale, attempted sale or servicing of any plans created under sections 412 or 419 of the internal revenue code;
- based upon directly or indirectly arising out of or in any way involving any actual or alleged sale or servicing of any insurance sold as part of or to be used in conjunction with or to fund any plan created under sections 412 or 419 of the internal revenue code.

AB. **Unsolicited Communications Exclusion**
The Insurer shall not be liable to pay any Loss in connection with any Claim based on or arising out of:
1. any actual or alleged violation of any federal anti-spam statute or regulation, including the CAN-SPAM Act of 2003;
2. any actual or alleged violation of any federal statute or regulation prohibiting the dissemination of unsolicited communications, including any violation of the Telephone Consumer Protection Act of 2001; or
3. any actual or alleged violation of any federal, state or local ant-spam statute, ordinance or other regulation that addresses, prohibits, or limits the printing, dissemination, disposal, collecting, recording, sending, transmitting, communicating or distribution of material or information including any statute or regulation prohibiting the dissemination of unsolicited communications.

Society of Financial Service Professionals

Enrollment Form

Claims Made & Reported Errors & Omissions Coverage

Policy Period: July 1, 2020 to July 1, 2021

By purchasing this insurance, agents become members of the Financial Sales Professionals Purchasing Group, a group formed and operating pursuant to the Liability Risk Retention Act of 1986 (15 USC 3901 et seq.). There is no additional charge for membership.

Instructions.....
- Please allow up to ten (10) business days for processing. ALL sections must be completed. Incomplete forms will take additional time to process.
- Return this form along with payment to: CalSurance Associates, P.O. Box 7048, Orange, CA 92863-7048

Coverage Questions..... Call CalSurance Associates at (800) 745-7189 or email at info@calsurance.com

Certificates of Insurance..... Go online: www.calsurance.com/societyfsp

☑ Section 1 - Your Information (Please Print Clearly)

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Contact Phone Number _____ - _____ - _____

E-mail _____

FSP Member ID _____

☑ Section 2 - Selection of Options

Effective Date of Coverage ____ - ____ - ____

Limit Options (choose one):	
❑	$1,000,000 Each Claim/$1,000,000 Aggregate
❑	$2,000,000 Each Claim/$2,000,000 Aggregate**

Coverage Options (choose one)		
❑	**Coverage Level I**: Fixed Life Insurance, Accident & Health, Disability & Fixed Annuities	
❑	**Coverage Level II**: Level I, plus Variable Products, Mutual Funds & Employee Benefit Plans *	
Available Online Only	**Coverage Level III**: Level I & II, Plus Securities and Property & Casualty (P&C) Products **	
Amount Due (including Admin Fee): See Premium Matrix		**$**
Optional Endorsement(s)		
❑	**Privacy Protection (Cyber) Coverage*****:	**$100 Additional Premium**
TOTAL DUE:		**$**

* Claims involving Coverage Level II are subject to a minimum deductible of $5,000 per Reg. Rep. (Mutual Funds & variable products) and $1,000 per Agent all outside business.

** Claims involving Coverage Level III are subject to a sub-limit of $1,000,000 regardless of the limit elected.

*** Claims involving Privacy Protection (Cyber) are subject to a $100,000 aggregate limit per Insured regardless of the limit elected.

☑ Section 3 - Payment Option

❑ **Payment in Full by check:** Check made payable to CalSurance Associates for the ***full premium***.

Additional payment options including installments by Credit Card or Debit to Checking (ACH) are available online at:

www.calsurance.com/societyfsp

☑ Section 4 - Auto Renew Notice

Information regarding the July 1, 2021 program renewal will be made available on the program website prior to expiration. This may include an offer of automatic coverage renewal based upon your eligibility and selected payment method. Failure to take appropriate action may lead to a lapse of coverage and the denial of claims. It is the insured's responsibility to verify renewal of coverage prior to expiration.

☑ Section 5 - Notices and Warranties

NOTICE: I must be a member agent or agency in good standing with The Society of Financial Service Professionals to be eligible for this program. Otherwise, I will not be considered an Insured under this program and no claims made against me will be covered.

I warrant that I am a member agent or agency in good standing with The Society of Financial Service Professionals.

NOTICE: This is a claims made and reported policy. If I have knowledge of any claim or incident that could give rise to a claim under the proposed policy and any claim or action arises therefrom, it is excluded from coverage for which this form applies. A potential gap in coverage may occur if I elect an effective date that is not continuous with my prior expiration date, and may result in the denial of a claim.

I warrant that I have no knowledge of any pending claim or incident that could give rise to a claim under the proposed policy.

I acknowledge that the specimen policy and program materials have been delivered to me via www.calsurance.com/societyfsp and I have reviewed these documents prior to enrolling in the program.

I warrant and represent that the above statements are true and that I have not suppressed or misstated any material facts and I agree that this application shall be the basis of the contract with the company issuing the policy. It is understood that completion of this application does not bind the company to issue or the applicant to purchase the insurance.

I have read the above notices and warranties and agree.

Signature (Required) _____ Today's Date _____

CalSurance Associates, a Division of Brown & Brown Program Insurance Services, Inc.
Domiciled in California, CA License Number 0B02587

COVERAGE LEVEL I: LIFE, ACCIDENT & HEALTH, DISABILITY, FIXED ANNUITIES

$1,000,000/$1,000,000 Liability Limit

$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$624.00	$ 35.00	$659.00
August	$571.00	$ 35.00	$606.00
September	$518.00	$ 35.00	$553.00
October	$467.00	$ 35.00	$502.00
November	$414.00	$ 35.00	$449.00
December	$363.00	$ 35.00	$398.00
January	$310.00	$ 35.00	$345.00
February	$257.00	$ 35.00	$292.00
March	$208.00	$ 35.00	$243.00
April	$155.00	$ 35.00	$190.00
May	$104.00	$ 35.00	$139.00
June	$ 51.00	$ 35.00	$ 86.00

$2,000,000/$2,000,000 Liability Limit

$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$829.00	$ 35.00	$864.00
August	$759.00	$ 35.00	$794.00
September	$689.00	$ 35.00	$724.00
October	$621.00	$ 35.00	$656.00
November	$550.00	$ 35.00	$585.00
December	$482.00	$ 35.00	$517.00
January	$412.00	$ 35.00	$447.00
February	$342.00	$ 35.00	$377.00
March	$276.00	$ 35.00	$311.00
April	$206.00	$ 35.00	$241.00
May	$138.00	$ 35.00	$173.00
June	$ 68.00	$ 35.00	$103.00

COVERAGE LEVEL II: LIFE, ACCIDENT & HEALTH, DISABILITY, FIXED ANNUITIES AND VARIABLE PRODUCTS, MUTUAL FUNDS, GROUP FINANCIAL PLANS

$1,000,000/$1,000,000 Liability Limit

$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$763.00	$35.00	$798.00
August	$698.00	$35.00	$733.00
September	$634.00	$35.00	$669.00
October	$571.00	$35.00	$606.00
November	$507.00	$35.00	$542.00
December	$444.00	$35.00	$479.00
January	$379.00	$35.00	$414.00
February	$315.00	$35.00	$350.00
March	$254.00	$35.00	$289.00
April	$190.00	$35.00	$225.00
May	$127.00	$35.00	$162.00
June	$ 63.00	$35.00	$ 98.00

$2,000,000/$2,000,000 Liability Limit

$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$1,015.00	$35.00	$1,050.00
August	$ 929.00	$35.00	$ 964.00
September	$ 843.00	$35.00	$ 878.00
October	$ 760.00	$35.00	$ 795.00
November	$ 674.00	$35.00	$ 709.00
December	$ 591.00	$35.00	$ 626.00
January	$ 505.00	$35.00	$ 540.00
February	$ 419.00	$35.00	$ 454.00
March	$ 338.00	$35.00	$ 373.00
April	$ 252.00	$35.00	$ 287.00
May	$ 169.00	$35.00	$ 204.00
June	$ 83.00	$35.00	$ 118.00

*$1,000 Deductible applies only to Claims involving Coverage Level I.
Coverage for Claims involving Level II products (mutual funds, variable life and variable annuities) are subject to a $5,000 deductible per Registered Representative. Coverage for Claims involving Level III products are subject to a deductible of $10,000 and a sub-limit of liability of $1,000,000 each Claim, each Agent or Agency/Agency Staff.
Coverage Level III is only available online. $1,000 per Agent deductible applies to all outside business.

COVERAGE LEVEL III: LIFE, ACCIDENT & HEALTH, DISABILITY, FIXED ANNUITIES AND VARIABLE PRODUCTS, MUTUAL FUNDS, GROUP FINANCIAL PLANS, SECURITIES AND PROPERTY CASUALTY

$1,000,000/$1,000,000 Liability Limit
$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$1,141.00	$35.00	$1,176.00
August	$1,044.00	$35.00	$1,079.00
September	$ 948.00	$35.00	$ 983.00
October	$ 854.00	$35.00	$ 889.00
November	$ 758.00	$35.00	$ 793.00
December	$ 664.00	$35.00	$ 699.00
January	$ 567.00	$35.00	$ 602.00
February	$ 471.00	$35.00	$ 506.00
March	$ 380.00	$35.00	$ 415.00
April	$ 284.00	$35.00	$ 319.00
May	$ 190.00	$35.00	$ 225.00
June	$ 94.00	$35.00	$ 129.00

$2,000,000/$2,000,000 Liability Limit
$1,000 Deductible*

	Premium	Admin Fee	Total Due
July	$1,470.00	$35.00	$1,505.00
August	$1,345.00	$35.00	$1,380.00
September	$1,221.00	$35.00	$1,256.00
October	$1,100.00	$35.00	$1,135.00
November	$ 976.00	$35.00	$1,011.00
December	$ 855.00	$35.00	$ 890.00
January	$ 731.00	$35.00	$ 766.00
February	$ 606.00	$35.00	$ 641.00
March	$ 490.00	$35.00	$ 525.00
April	$ 365.00	$35.00	$ 400.00
May	$ 245.00	$35.00	$ 280.00
June	$ 120.00	$35.00	$ 155.00

*$1,000 Deductible applies only to Claims involving Coverage Level I.
Coverage for Claims involving Level II products (mutual funds, variable life and variable annuities) are subject to a $5,000 deductible per Registered Representative. Coverage for Claims involving Level III products are subject to a deductible of $10,000 and a sub-limit of liability of $1,000,000 each Claim, each Agent or Agency/Agency Staff.
Coverage Level III is only available online. $1,000 per Agent deductible applies to all outside business.