

Equita Final Expense Services Lead Program Agreement



EFES Direct Mail Leads are priced at \$28 - \$33 Cost Per Lead

We offer our agents mail financing for direct mail leads. Here is how it works:

- EFES pays for the mail and sends to the client
- Once the client returns the lead, EFES assigns the lead to the agent
- The agent pays for the leads received and is able to access them

EFES assumes the risk of return rates and provides the agent with a set direct mail lead price of \$28-\$33 per lead. In return we require that the agent pay a deposit equal to three weeks of leads. The following table shows an example of what to expect.

Example:

	Agent Action Item	Agent Action Item
Week 1	Agent pays \$560 towards mail deposit	EFES mails to achieve a minimum of 20 leads returned
Week 2	Agent pays \$560 towards mail deposit	EFES mails to achieve a minimum of 20 leads returned
Week 3	Agent pays \$560 towards mail deposit	EFES mails to achieve a minimum of 20 leads returned
Week 4	Agent pays for week 1 leads received (Approximately 20 leads)	EFES mails to achieve a minimum of 20 leads returned
Week 5	Agent pays for week 2 leads received (Approximately 20 leads)	EFES mails to achieve a minimum of 20 leads returned
Week 6	Agent pays for week 3 leads received (Approximately 20 leads)	EFES mails to achieve a minimum of 20 leads returned
Week 7	Agent pays for week 4 leads received (Approximately 20 leads)	EFES mails to achieve a minimum of 20 leads returned

EFES Mail Deposit Example: 20 leads at \$28 each = \$560 x 3 weeks = \$1,680

The Mail Deposit will allow EFES to mail for each agent on a scheduled weekly basis. The agent is not required to pay for leads until they return, which is generally after three weeks of payments have been made to complete the deposit. Deposits will be returned to the agent after termination of the agent's agreement with EFES and all outstanding leads are accounted for and payment is collected. The agent has the option to pay for any outstanding leads and the full deposit will be returned.

Return this document to Barbara Thompson

email: b.thompson@equita1.com - fax: (214) 393-4955

Equita Final Expense Services Lead Program Agreement



I, _____ (Independent Producer), authorize EFES to charge the credit card identified in this document for the amount of _____.

Signature: _____ Date: _____

Direct Mail Lead Order

Number of leads each week		Price Per Lead	Total
Week 1	Direct Mail Leads	\$	
Week 2	Direct Mail Leads	\$	
Week 3	Direct Mail Leads	\$	
Week 4	Direct Mail Leads	\$	
Total		\$	

Direct Mail Markets Requested

Counties in order of preference:

1. _____

Preferred Zip Codes: _____

2. _____

Preferred Zip Codes: _____

3. _____

Preferred Zip Codes: _____

4. _____

Preferred Zip Codes: _____

5. _____

Preferred Zip Codes: _____

If the mail return exceeds the agreed number of purchased leads the independent producer is responsible for purchasing all of the leads received. All Texas leads are subject to Texas sales tax of 8.25%.

Slip-Life Lead (EQFA) \$28 Per Lead
Price per lead is based on EFES income and age filters

**2016 BENEFIT INFORMATION
 FOR <STATE> CITIZENS ONLY**

You may qualify for a state-regulated life insurance program to pay for your final expenses.

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

You are entitled to receive no-cost information as a resident of <STATE>. **IMPORTANT** - Return this postage paid card within 5 days.

Name _____

Home Address _____

(Must provide physical home address. No PO boxes, please.)

Phone (_____) _____

(Please include area code & phone number to ensure proper info routing.)

Age _____ Spouse's Age _____

Spouse's Name _____

Not affiliated with or endorsed by any government agency.
 To opt out of future mailings please call (855) 792-6172.

EQFH4-I



\$255 (EQFB) \$29 Per Lead
Price per lead is based on EFES income and age filters

**NEW 2015 BENEFIT UPDATE
 FOR <STATE> RESIDENTS ONLY**

There is a **NEW** state regulated and approved program that is payable to you in addition to the \$255 death benefit Social Security currently pays. This life insurance benefit is available to seniors age 50-85 regardless of your health & past medical conditions even if you've been turned down before. This benefit can provide up to \$35,000 to your family or loved ones in the event of death & is **TAX FREE** for <State> residents. It's important that you know how to qualify for this benefit.

You are entitled to receive no-cost information as a resident of <State>. **IMPORTANT**-Return this postage-paid card within 5 days.

Name _____

Home Address _____

(Must provide physical home address. No PO boxes, please.)

Phone (_____) _____

(Please include area code & phone number to ensure proper info routing.)

Age _____ Spouse's Age _____

Spouse's Name _____

Not affiliated with or endorsed by any government agency.

EQFB



Penny Lead (EQFD) \$28 Per Lead
Price per lead is based on EFES income and age filters

2015 BENEFIT INFORMATION
FOR <STATE> RESIDENTS ONLY

You may qualify for a NEW state regulated life insurance program to pay final expenses for just pennies a day regardless of your health and past medical conditions even if you have been turned down before.

It is important that you know how to qualify for this benefit that is available to you. This benefit can pay up to 100% of your funeral expenses up to \$35,000 or more. This benefit is tax-free for <State> residents.

You are entitled to receive no-cost information as a resident of <State>. IMPORTANT-Return this postage-paid card within 5 days.

Name _____

Home Address _____

(If PO Box or different from listed address. Must be home address.)

Phone (_____) _____

(Note!) Address, area code & phone number needed to insure proper info routing

Age _____ Spouse's Age _____

Spouse's Name _____

Not affiliated with or endorsed by any government agency.

EQFD

Slip (EQFF) \$33 Per Lead
Price per lead is based on EFES income and age filters

2015 BENEFIT INFORMATION
FOR <STATE> CITIZENS ONLY

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

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

You are entitled to receive no-cost information as a resident of <STATE>. IMPORTANT - Return this postage-paid card within 5 days.

Name _____

Home Address _____

(If PO Box or different from listed address. Must be home address.)

Phone (_____) _____

(Please include area code & phone number to ensure proper info routing.)

Age _____ Spouse's Age _____

Spouse's Name _____

Not affiliated with or endorsed by any government agency.

EQFF



This Lead Purchase Agreement is entered into effective with the signature date below and between Equita Final Expense Services “EFES”, and the undersigned agent henceforth referred to as “I” and “agent”:

The undersigned agent hereby agrees to comply with all terms and conditions of this Lead Purchase Agreement with EFES. I understand that this lead program allows me to purchase direct mail final expense leads at a fixed price. For and in consideration of such arrangement, I agree to place all business generated from EFES leads and referrals from those leads with carriers with which I am contracted through EFES and with the insurance company agent writing numbers affiliated with EFES. This includes Life Insurance, Annuities and other insurance products.

Agent agrees that any business placed with non EFES approved carriers, from EFES provided leads or referrals from EFES provided leads must be approved in writing by an authorized EFES Home Office representative.

I also agree that I am fully responsible for all business I submit to all insurance companies and I indemnify and hold EFES harmless from and against any and all losses, liabilities, damages, costs, fees, and expenses which EFES may suffer or incur arising or resulting from any claim, action or proceedings involving my activities. Agent agrees to purchase leads from EFES at a cost determined by the company. **ALL LEAD ORDERS ARE FINAL AND NON-REFUNDABLE.**

Agent authorizes EFES to charge a credit card for the cost of the leads and agrees to provide sufficient information in order to facilitate that charge, such as credit card account number, expiration date, credit card mailing address, etc. Agent understands this is an ongoing weekly order and leads will continue to be ordered each week until the agent provides a written request to discontinue the order.

Leads per week (15 minimum): _____ Select Lead Card: EQFA _____ EQFB _____ EQFF _____ EQFD _____

Credit Card Type: _____ Visa _____ Discover _____ Mastercard _____ American Express _____

Credit Card Number: _____ Expiration Date: _____ / _____ CVV2 Card Security Code: _____

Card Holder Name: _____

Billing Address: _____ Zip Code: _____ Phone Number: _____

City, State: _____ Email: _____

This authorization will remain in force until written notification is sent to EFES and the Insurance Companies and/or satisfaction of any monies owed has been met.

By signing this agreement I acknowledge that I have read and agree to the above terms and I authorize EFES to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is valid for both initial charges as well as recurring charges. I understand that all weekly recurring charges for lead purchases are final and non-refundable.

PRINTED AGENT NAME: _____ AGENT SIGNATURE: _____

AGENT ADDRESS: _____ DATE: _____

CARDHOLDER SIGNATURE: _____ DATE: _____

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I, _____, authorize EFES to send me marketing and other promotional materials electronically. These methods may include: Direct EFES communication, 3rd party Email Marketing companies on behalf of EFES, Text Messaging, and Email Blasts.

My contact information is (Please PRINT):

Email Address:

Mobile Number:

Independent Producer Signature:

Date:

Texas Tax Exempt Form

Under Texas laws, Equita Final Expense Services must collect Texas state and local sales taxes on lead license sales unless the purchaser provides a valid Texas Sales Tax Exemption Certificate.

The Exemption only applies to independent producers in one of the following categories:

- Any independent producer with an address outside of Texas, who does not work leads in the State of Texas.
- Any independent producer with a Texas address, who works only leads outside of Texas.

Be advised, however, that if you do not complete, sign and return this form, concurrently with your execution of the Lead Program Independent Producer Agreement, you will be charged Texas state and local sales taxes on all leads purchased from Equita Final Expense Services.

The form can be located at: <http://www.window.state.tx.us/taxinfo/taxforms/01-339.pdf>

If you have any questions regarding this form, please consult with your own tax adviser.

**Return this document to Barbara Thompson
email: b.thompson@equita1.com - fax: (214) 393-4955**