

# UNITED AMERICAN COMMISSION SCHEDULE - LEVEL PC04

## HEALTH PRODUCTS

H97

### Foundation Signature Series (MMGAP)

<i>Standard Rates:</i>			<b>CA</b>		<b>CO, VA, PA</b>		<b>FL, ND, SD, WV</b>	
	<b>1st Year</b>	<b>Years 2+</b>	<b>1st Year</b>	<b>Years 2+</b>	<b>1st Year</b>	<b>Years 2+</b>	<b>1st Year</b>	<b>Years 2+</b>
All ages:	30%	7%	9%	2%	20%	5%	16%	3%

†Plus registration fee (less \$1 on monthly and quarterly modes)

## OTHER HEALTH PRODUCTS (Including Critical Illness & Cancer)

H97

### CANLS 2, CANLS, CILS, UA250 & Misc. Health (CANLS Only available in states where CANLS-2 is not approved)

<i>Standard Rates - CANLS, CILS</i>				<i>Standard Rates - CANLS 2</i>			<i>CO, MD, WA - CILS &amp; CANLS</i>		
	<b>1st Year</b>	<b>Years 2-10</b>	<b>Years 11+</b>	<b>1st Year</b>	<b>Years 2-3</b>	<b>Years 4+</b>	<b>1st Year</b>	<b>Years 2-10</b>	<b>Years 11+</b>
All ages:	45%	9%	9%	55%	10%	8%	40%	7%	7%
<i>FL - CANB</i>				<i>FL - CANLS</i>			<i>CO, MD, WA - CANLS-2</i>		
	<b>1st Year</b>	<b>Years 2-10</b>	<b>Years 11+</b>	<b>1st Year</b>	<b>Years 2+</b>		<b>1st Year</b>	<b>Years 2-10</b>	<b>Years 11+</b>
All ages:	40%	9%	9%	45%	4%		35%	7%	7%

### MSXC

<i>Standard Rates:</i>			<b>CA</b>	
	<b>1st Year</b>	<b>Years 2+</b>	<b>1st Year</b>	<b>Years 2+</b>
All ages:	45%	9%	12%	1%

### Tradition Signature Series (INDEM1)

<i>Standard Rates:</i>			<b>CA</b>	
	<b>1st Year</b>	<b>Years 2+</b>	<b>1st Year</b>	<b>Years 2+</b>
All ages:	N/A	N/A	25%	6%

†Plus registration fee (less \$1 on monthly and quarterly modes)

Commissions will be 3% less when initial premium payment is made by credit/debit card. In Addition, all subsequent commissions will be contingent on how initial premium was paid.

#### **NOTE: All Products may not be available in your state: Standard Rates shall apply unless state specific rates are provided herein.**

The above commission percentages constitute the total combined commissions which can be earned at this hierarchy level and all levels beneath it (i.e., any assigned agents who are lower in the hierarchy). Total commissions paid under this Schedule shall be reduced by the amount of any commissions paid or loaned by Company to such assigned agents for the same business. The initial commission is calculated on the modal premium collected with the application. Remaining first year commissions are calculated on the first policy year premiums collected subsequent to issue. Second and subsequent years renewal commissions are calculated on premiums collected after the first policy year. Renewal commissions will be calculated on the premium in effect on issue date or the premium paid, whichever is lower. Premium increases implemented after policy issue will not be counted in the calculation of commissions. Commissions will not be paid on any portion of the premium charged for Medicare Supplement policies that is attributable to coverage for the Medicare Part B Deductible, or on any fees charged for a insurance program or service. No commissions will be paid in association with Reserve Fund Annuity sales. The Company reserves the right to change the commissions at any time, however, any change shall apply from and after the effective date of such change on business produced after that date. The Company in its sole discretion will determine which products will be available for sale and may withdraw any products at any time. This commission schedule is subject to any change required by federal or state law or regulation.

This Commission Schedule shall be effective September 1, 2010

Rev 08-12-10 tw

