## Compensation Appendix Monthly Fee DPP

Issue Date:

| ISSUED TO: |  |  |
|------------|--|--|

This Appendix is incorporated and made a part of the Representative Marketing Agreement to which it is attached. The issuance of a Compensation Appendix with a more recent Issue Date shall supersede the previous issue and shall be incorporated upon written notice to the Representative. The Representative shall not change the Compensation Appendix without prior written notice to Censtat.

Censtat, or CSO as Censtat's Administrator, shall pay Representative compensation equal to the Compensation Amount as determined below per Approved Addendum submitted by the Financial Institution and its financial affiliates and for which premium and applicable fees are received by Censtat.

Upon receipt of notice from Censtat, Representative shall reimburse its full Compensation Amount for all Approved Addenda cancelled:

- 1. Within 30 days of the effective date of the Approved Addendum.
- 2. When it is found the borrower did not qualify to purchase the protection and such protection is cancelled as of its effective date.

To calculate the total Compensation, Compensation Amount will be a percentage of the contractual liability premium (CLP) submitted by Financial Institution and its financial affiliates and received by Censtat.

## KEY: \*ALL BUSINESS/ACCOUNTS NOT SPECIFICALLY ADDRESSED

|                   | Account Name/Type* | Approved<br>Addendum<br>Form Number | CLP<br>State | Open End<br>(OE)<br>Closed End<br>(CE) | Effective<br>Date | Expiration<br>Date | Compensation Amount |                 |                     |                 |                     |                 |
|-------------------|--------------------|-------------------------------------|--------------|--|-------------------|--------------------|---------------------|-----------------|---------------------|-----------------|---------------------|-----------------|
| Account<br>Number |                    |                                     |              |  |                   |                    | Life                |                 | Disability          |                 | Disability/IU       |                 |
|                   |                    |                                     |              |  |                   |                    | % of CLP<br>Premium | % of<br>DPP Fee | % of CLP<br>Premium | % of<br>DPP Fee | % of CLP<br>Premium | % of<br>DPP Fee |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |
|                   |                    |                                     |              |  |                   |                    |                     |                 |                     |                 |                     |                 |