APPENDIX A - INSURANCE AGENT (PRODUCER) DISCLOSURE FOR ANNUITIES

Do Not Sign Unless You Have Read and Understand the Information in this Form

Date:	
Date: INSURANCE AGENT (PRODUCER) INFORMATION ("Me", "I", "My") First Name: Last Name: Website: Business Mailing Address: Business Telephone Number: Email Address: in state of in state of CUSTOMER INFORMATION ("You", "Your") First Name: Last Name: Last Name:	
First Name:	Last Name:
Business/Agency Name:	Website:
Business Mailing Address:	
Business Telephone Number:	
Email Address:	
National Producer Number	in state of
CUSTOMER INFORMATION ("You", "Your")	
First Name:	Last Name:
What Types of Products Can I Sell You?	
	e with state law. <u>If I recommend that You buy an annuity, it means I believurance needs, and financial objectives.</u> Other financial products, such as life may meet Your needs.
I offer the following products: ☐ Fixed or Fixed Indexed Annuities ☐ Variable Annuities ☐ Life Insurance	
I need a separate license to provide advice about insurance financial products that I am licensed and ☐ Mutual Funds ☐ Stocks/Bonds ☐ Certificates of Deposits	or to sell non-insurance financial products. I have checked below any non authorized to provide advice about or to sell.
Whose Annuities Can I Sell to You?	
I am authorized to sell:	
☐ Annuities from Only One (1) Insurer	
☐ Annuities from Two or More Insurers	
☐ Annuities from Two or More Insurers although	l primarily sell annuities from:

It's important for You to understand how I'm paid for my work. Depending on the particular annuity You purchase, I may be paid a commission or a fee. Commissions are generally paid to Me by the insurance company while fees are generally paid to Me by the consumer. If You have questions about how I'm paid, please ask Me. Depending on the particular annuity You buy, I will or may be paid cash compensation as follows: ☐ Commission, which is usually paid by the insurance company or other sources. If other sources, describe: ☐ Fees (such as a fixed amount, an hourly rate, or a percentage of your payment), which are usually paid directly by the customer. ☐ Other (Describe): If You have questions about the above compensation I will be paid for this transaction, please ask me. I may also receive other indirect compensation resulting from this transaction (sometimes called "non-cash" compensation), such as health or retirement benefits, office rent and support, or other incentives from the insurance company or other sources. Have you identified a "material conflict of interest" associated with the annuity recommendation? ☐ Yes ☐ No Please note: Material conflict of interest does not include cash or non-cash compensation. A material conflict of interest exists when there is an ownership stake of a producer in a carrier or may exist when a producer is dually registered as an Investment Adviser under state securities law. If yes, please explain: **SIGNATURES** By signing below, You acknowledge that You have read and understand the information provided to You in this document. Customer Signature: Date: Agent (Producer) Signature: _____ Date: ____

How I'm Paid for My Work:

Protective Life Insurance Company • PO Box 10648 • Birmingham, AL 35202-0648 • 800-456-6330 • Fax 205-268-3151 PROTECTIVE LIFE INSURANCE COMPANY IS NOT LICENSED IN NEW YORK