

Page 4: Agent Report. Make sure to include your Agent ID# and contact information.
Question Title

The First Catholic Slovak Ladies Association of the USA
Beachwood, OH 44122

Agent/Fieldworker/Recommender's Report

To the best of my knowledge and belief:

- A. I have asked the Proposed Insured each question on the application. The answers have been recorded by me exactly as stated.
- B. I have accurately answered any questions contained in the Agent's Report completed by me in connection with this application.
- C. I have verified the Proposed Insured's identity by viewing the individual's photograph on a driver's license, passport, or other official document.
- D. I have reviewed the entire application for corrections or omissions.
- E. I have personally solicited and secured this application.

Comments:

Agent/Fieldworker/Recommender's Interrogatory

1. To the Best of your knowledge and belief, does the Proposed Insured have existing life insurance or annuity policies in force? ____ Yes ____ No
(If yes, please provide insurer and amount.)_____

2. To the best of your knowledge and belief, will the insurance now applied for replace or change any existing insurance or annuity? ____ Yes ____ No

Agent: If the answer to Question #1 and/or Question #2 is Yes, you must present and read to the Applicant the Important Notice Regarding Replacement of Life Insurance or Annuities and return the Notice, signed by both you and the Applicant, with the completed application.

3. Advertising Materials:

I certify that I used FCSLA approved sales materials with this Applicant in the solicitation of this application.

I certify that this application is in accordance with FCSLA's Position Regarding the Replacement of Life Insurance and Annuity Policies.

By signing as Fieldworker/Recommender/Agent, I affirm that I am in compliance with the insurance sales laws of the state in which the contract was sold.

Printed Name of Fieldworker/Recommender/Agent. Agent ID#.

Date.

Signature of Fieldworker/Recommender/Agent. Agent ID#.

Telephone Number.

Address.

E-mail Address.

Address.

Fax Number.

From the By-Laws adopted Oct 8, 2014, Section II. Membership: