



Fixed Insurance & Annuities Transmittal Form

Licensing appointments should be verified prior to submitting business, call Harbour if you have licensing questions.

Date: _____

Marketing Group Business submitted thru: _____

Client name: _____

Issuer name: _____

Original paperwork submitted to:

Insurance Co. Marketing Group Harbour

Type of product:

Universal Life Face Amount \$ _____ Est. commission: \$ _____

Term Life Face Amount \$ _____ Est. commission: \$ _____

Annuity Investment Amount \$ _____ Est. commission: \$ _____

Deferred SPIA

Indexed – All paperwork submitted to insurance company must be included.

How will commission be paid to you? Directly from insurance company

Commissions have been assigned to be paid through Harbour

Forms attached:

Application

Customer Investment Profile CIP Form on file

Letter of Understanding Liquidation Form

Check payable to insurance co. Amount: \$ _____

**** IMPORTANT ****

Source of Funds _____

Replacement? Yes No

With What Company? _____

Any Surrender Charges? Yes No Amount: \$ _____

Additional information:

Representative name _____ No. _____

Please make sure this form is complete to insure proper credit.