

MESSER

Financial Group



Spend More of Your Time Growing Your Business and Less Time Dealing with E&O Insurance:

- Fast, easy-to-obtain coverage through online enrollment; no multi-page application required. Enroll online at: www.calsurance.com/MFG
- Certificates of Insurance issued immediately so you won't lose business waiting for your application to be processed, underwritten and/or quoted.
- Get assistance with enrollment and have your questions answered by a knowledgeable Customer Care staff: 800-745-7189.

Improve the Cash Flow of Your Business:

- Installment plans are available online using your credit card or ACH (Debit to Checking).
- Less out-of-pocket expenses at the time of a claim because deductibles are as low as \$500.

Have Peace of Mind in Uncertain Times:

- This program is underwritten by an A+ rated carrier.
- CalSurance® has market knowledge and understands E&O trends.

Take 10 minutes, Go Online & Enroll Today!
www.calsurance.com/MFG

Errors & Omissions Insurance Plan Highlights

Underwritten by:

Arch Insurance Company
Rated: A+ (Superior) XV A.M. Best

**The information obtained from A.M. best date August 17, 2016 is not in any way CalSurance Associates' warranty or guaranty of the financial stability of the insurer in question, and that the information is current only as of the date of the publication.*

Policy Number:

CAP0055264-04

Risk Purchasing Group Membership:

By applying for this insurance, agents are applying for membership in the Financial Sales Professionals Purchasing Group, a group formed and operating pursuant to the Liability Risk Retention Act of 1986 (15 USC 3901et seq.). There is no additional charge for this membership.

Limits of Liability (no policy aggregate):

\$1,000,000 Each Claim
\$3,000,000 Aggregate each Agent; or
\$2,000,000 Each Claim
\$2,000,000 Aggregate each Agent

Defense Costs:

Included in the Limits of Liability

Deductibles: (applies to Damages & Defense Costs)

\$ 500 each Claim each Agent for Messer Financial Group carriers' products
\$1,500 each Claim each Agent for all other covered products

Named Insured:

Affiliated Agents of Messer Financial Group, Inc. who are contracted with any life insurance company that is represented with Messer Financial Group.

Insureds:

1. Named Insured (Agent);
2. a corporation, partnership or other business entity owned and controlled by an Agent but solely with respect to the liability of such organization as it arises out of the Agent rendering or failing to render Professional Services;
3. an employee acting in his or her capacity as such and on behalf of an Agent but solely with respect to liability of such employee as it arises out of the Agent rendering or failing to render Professional Services; and
4. heirs, executors, administrators or legal representatives of an Agent in the event of death, incapacity or bankruptcy.

Coverage (Claims Made & Reported):

The Insurer shall pay on behalf of the Insured all Loss which the Insured shall become legally obligated to pay because of a Claim first made against the Insured during the Policy Period or an Extended reporting Period, if applicable, for a Wrongful Act committed on or after the Retroactive Date by the Insured solely in the rendering or failing to render Professional Services.

Professional Services:

Level I:

1. the solicitation, sale or servicing of life insurance, accident and health insurance, long-term care insurance, workers' compensation insurance as part of a 24-hour accident, health insurance product, disability income insurance or Medicare Supplemental Insurance;
2. the solicitation, sale or servicing group life, accident and health plans, provided such plans are fully insured at all times; and
3. financial planning, advice and consultation solely in connection with any of the products listed in paragraph 1 above.

Level II:

1. the solicitation, sale or servicing of life insurance, accident and health insurance, long-term care insurance, workers' compensation insurance as part of a 24-hour accident, health insurance product, disability income insurance or Medicare Supplemental Insurance;
2. the solicitation, sale or servicing group life, accident and health plans, provided such plans are fully insured at all times;
3. Annuities (other than variable annuities) and Equity Indexed Annuities; and
4. financial planning, advice and consultation solely in connection with any of the products listed in paragraphs 1-3 above.

Retroactive Date/Prior Acts:

Date of Agent's first continuously maintained Life Insurance Agents E&O policy. Proof of such coverage satisfactory to the carrier will be required in the event of a claim.

Extended Reporting Period (ERP):

If an agent's contract with all affiliated companies of Messer Financial Group, Inc. terminates for any reason, coverage will cease as of date of termination.

A One-year automatic ERP is provided to Insured Agents whose contract becomes terminated during the policy year, as long as not for disciplinary reasons, at no additional premium charge.

A Two-year automatic ERP is provided to Insured Agents who become retired, disabled or deceased during the policy year at no additional premium charge.

If such termination is in conjunction with retirement, disability or death, the following ERP options are available for purchase:

- 3 year at 200% of expiring annual premium;
- 5 year at 300% of expiring annual premium; or
- Unlimited at 400% of expiring annual premium.

Program Administration:

CalSurance Associates
A Division of Brown & Brown Program Insurance Services, Inc.
California License Number 0B02587
Phone: (800) 745-7189

Claims Administration:

Lancer Claim Services
A Division of Brown & Brown Program Insurance Services, Inc.
681 S. Parker Street, Suite 300
Orange, CA 92868
Phone: (800) 821-0540

Exclusions (including, but not limited to):

This Policy does not apply to any Claim:

- A. based upon, arising out of or in any way involving any fact, circumstance or situation which has been the subject of any written notice given under any policy of which this Policy is a direct or indirect renewal or replacement or which preceded this Policy;
- B. based upon, arising out of or in any way involving any act, error or omission occurring prior to the date of the Agent's initial enrollment as an Insured under this Policy or a previously issued policy by the Insurer if on the date of initial enrollment the Agent had knowledge of any act, error or omission which could reasonably be expected to result in a Claim;
- C. based upon, arising out of or in any way involving any prior or pending litigation against any Insured filed on or before the inception date of this Policy or under any other policy of which this Policy is a renewal, whichever is earlier, or the same or substantially the same fact, circumstance or situation underlying or alleged therein;
- D. based upon, arising out of or in any way involving any dishonest, fraudulent, criminal, malicious or purposeful act, error or omission committed by or at the direction of an Insured; however, notwithstanding the foregoing, the Insured shall be afforded a defense, subject to the terms of this Policy, until the allegations are subsequently proven by a final adjudication. In such event, the Insured shall reimburse the Insurer for all Defense Costs incurred by the Insurer;
- E. based upon, arising out of or in any way involving an Insured gaining, in fact, any profit, remuneration or pecuniary advantage to which the Insured was not legally entitled;
- F. based upon, arising out of or in any way involving a willful violation of the rules or regulations of the National Association of Securities Dealers, Securities and Exchange Commission, Securities Act of 1933, Securities Exchange Act of 1934, Investment Company Act of 1940, or the Investment Advisors Act of 1940 and any amendments thereto, or of any state securities statute or state regulatory agency;
- G. based upon, arising out of or in any way involving any commingling of or improper use of client funds;
- H. based upon, arising out of or in any way involving investment products partially or totally owned by the Insured;
- I. based upon, arising out of or in any way involving bodily injury, sickness, disease or death of any person, or damage to or destruction of any tangible property, including loss of use thereof;
- J. based upon, arising out of or in any way involving discrimination as defined by federal, state or local statute, regulation, law or ordinance;
- K. based upon, arising out of or in any way involving the liability of others assumed by the Insured under any contract or agreement unless such liability would have attached to the Insured even in the absence of such agreement;
- L. based upon, arising out of or in any way involving any pension, profit sharing, health and welfare, or other employee benefit plan or trust sponsored by the Insured as an employer;
- M. based upon, arising out of or in any way involving any professional services performed by the Insured as an actuary, accountant, attorney, real estate agent or real estate broker, property/casualty insurance agent or third party claims administrator; however, this Exclusion shall not apply to tax advice incidental to the sale of products listed in Section III. M. 1;
- N. based upon, arising out of or in any way involving insolvency, receivership, conservatorship, liquidation, bankruptcy, inability or refusal to pay of any organization, entity or vehicle of any kind, nature or structure in which the Insured has placed, recommended to be placed or obtained coverage or in which an Insured has placed or recommended to be placed the funds of a client or account; however, this Exclusion shall not apply if such organization, entity or vehicle is an insurance company that was rated B++ or better by A.M. Best at the time the Insured placed, recommended to be placed or obtained such coverage for a client in such insurance company or in which an Insured has placed such funds of a client or account;
- O. based upon, arising out of or in any way involving the Insured's inability or refusal to pay or collect premium, claim or tax monies;
- P. brought or maintained, directly or indirectly, by or on behalf of :
 1. an Insured;
 2. the Sponsoring Company;
 3. any insurance company or Broker/Dealer;
 4. any insurance agent or broker;
 5. any individual or entity that is not a client of an Insured; however, this Exclusion shall not apply to a Claim brought by an individual or entity who is an alleged beneficiary or heir, executor or administrator of a deceased client of an Insured;
 6. any enterprise that owns, operates, controls or manages an Insured;
 7. an enterprise which an Insured owns, operates, controls or manages; or
 8. any governmental or quasi-governmental official or agency in any capacity, including but not limited to the Securities and Exchange Commission, National Association of Securities Dealers, the Securities Investor Protection Corporation, or any state or federal securities or insurance commission or agency; however, this Exclusion shall not apply to a Claim brought by or on behalf of such official or entity in its capacity as a client of an Insured;
- Q. based upon, arising out of or in any way involving the use of confidential information by an Insured, including but not limited to such use for the purpose of replacement of coverage;
- R. based upon, arising out of or in any way involving the placement of a client's coverage or funds directly or indirectly with any organization, entity or vehicle of any kind, nature or structure which is not licensed to do business in the state or jurisdiction with authority to regulate such business; however, this Exclusion shall not apply to any Claim arising from or contributed to by the placement of a client's coverage or funds directly or indirectly with such organization, entity or vehicle which is an eligible surplus lines insurer in the state or jurisdiction with authority to regulate such business;
- S. based upon, arising out of or in any way involving the offering, sale or servicing of structured settlements; however, this Exclusion shall not apply to a Claim arising out of the selling or servicing of the underlying covered product;
- T. based upon, arising out of or in any way involving the ownership, formation, operation, or administration of a health maintenance organization, preferred provider organization, captive, risk retention group, self-insurance program or purchasing group;
- U. based upon, arising out of or in any way involving the placement of coverage with a Multiple Employer Welfare Arrangement;
- V. based upon, arising out of or any way involving the purchase, sale or the giving of advice regarding promissory notes, viatical or life settlements or any Security backed by viatical settlements, commodities, commodity future contracts, or option contracts other than covered call options;
- W. based upon, arising out of or in any way involving the purchase, sale, or the giving of advice regarding "junk bonds" or "high yield bonds". For purposes of this Exclusion, "junk bonds" or "high yield bonds" shall mean bonds which, at the time of purchase or sale were unrated or rated as below investment grade by any rating agency (including but limited to Moody's rated bonds of Ba or lower or S&P rated bonds of BB or lower);
- X. based upon, arising out of or in any way involving the purchase, sale, or the giving of advice regarding callable certificates of deposit or any investment involving ATM machines, payphones or ETS payphones, Debentures, CDOs, CMOs, 412(i) Plans, 419 Plans, Reg. D and unregistered securities products, DBSI Management products, Provident Royalties, Shale Royalties, Medical Capital Note Program, Black Diamond Program, Desert Capital REIT, IMH Secured Loan Fund, LLC, Geneva Exchange LLC/The Geneva Organization; or
- Y. based upon, arising out of or in any way involving a self-funded or partially self-funded medical plan.

By purchasing this insurance, agents become members of the Financial Sales Professionals Purchasing Group, a group formed and operating pursuant to the Liability Risk Retention Act of 1986 (15 USC 3901 et seq.). There is no additional charge for membership.

Instructions.....Complete ALL sections of this form and include your signature at the bottom.
Return this form along with your check to: CalSurance Associates
P.O. Box 7048, Orange, CA 92863-7048

Online Enrollment:
www.calsurance.com/MFG

Coverage Questions.....Call CalSurance Associates at (800) 745-7189 or email at info@calsurance.com
Reminder.....ALL sections must be completed. Incomplete forms will take additional time to process.

Certificates of Insurance.....Call CalSurance Associates at (800) 745-7189 *or*
Visit: www.calsurance.com/MFG - Certificate Reprinting - Sponsoring Group - Messer Financial Group, Inc.

Section 1 - Your Information (Please Print Clearly)

First Name Last Name Street Address

 Mailing Address (if different than street address) City State Zip Code
 - - - -
 Contact Phone Number Fax Number E-mail

Section 2 - Eligibility Questions

- Are your total commissions greater than \$1,000,000?
 Yes/Agree No/Disagree
- Do you have pending or paid E&O claim(s) in the past five (5) years or are you aware of any incident(s) or circumstance(s) that may give rise to an E&O claim? [Note: any such potential claims not already reported to your current E&O carrier are excluded from the proposed coverage and should be reported to your current E&O carrier immediately.] Yes/Agree No/Disagree
- Have you ever been the subject of a reprimand, a regulatory or disciplinary action or criminal action by any federal, state or local authority, or by any self-governing, regulatory body or bodies, as a result of their professional services? Yes/Agree No/Disagree
- Do you operate as marketing organization or wholesaler?
 Yes/Agree No/Disagree

IF YOU ANSWERED "YES" TO ANY OF THESE QUESTIONS, YOU ARE NOT ELIGIBLE FOR THIS PROGRAM.

Section 3 - Effective Date and Amount Due

Effective Date of Coverage (Must be completed) - -

NOTICE: Effective date of coverage cannot be prior to your date of contract with a member company of the sponsor and cannot be backdated to a prior month.

	\$1,000,000 Each claim / \$3,000,000 Aggregate	\$2,000,000 Each claim / \$2,000,000 Aggregate
Level I: Fixed Life, Accident & Health, Long Term Care, Medicare Supplemental Advantage Products, Disability Income Insurance	<input type="checkbox"/> \$445	<input type="checkbox"/> \$490
Level II: Level I Plus Fixed & Equity Indexed Annuities	<input type="checkbox"/> \$480	<input type="checkbox"/> \$520

Above premiums are inclusive of a non-refundable sponsor affiliation fee and administrative fees of \$70.

Section 4 - Payment Options

- Check or Money Order:** (Payment in Full Only, No Installments)
Please make check or money order payable to CalSurance Associates.
Mail Check to: CalSurance Associates
P.O. Box 7048
Orange, CA 92863-7048

Payment options including installments by credit card or ACH (Debit to Checking) are available only online at:

www.calsurance.com/MFG

Section 4 - Notices and Warranties

NOTICE: I must maintain an active affiliation with Messer Financial Group to be eligible for this program. Otherwise, I will not be considered an Insured under this program and no claims made against me will be covered.

I warrant that I am currently affiliated with Messer Financial Group.

NOTICE: This is a claims made and reported policy. If I have knowledge of any claim or incident that could give rise to a claim under the proposed policy and any claim or action arises therefrom, it is excluded from coverage for which this form applies. A potential gap in coverage may occur if I elect an effective date that is not continuous with my prior expiration date, and may result in the denial of a claim.

I warrant that I have no knowledge of any pending claim or incident that could give rise to a claim under the proposed policy.

I acknowledge that the specimen policy and program materials have been delivered to me via www.calsurance.com/mfg and I have reviewed these documents prior to enrolling in the program.

I warrant and represent that the above statements are true and that I have not suppressed or misstated any material facts and I agree that this application shall be the basis of the contract with the company issuing the policy. It is understood that completion of this application does not bind the company to issue or the applicant to purchase the insurance.

I have read the above notices and warranties and agree.

Signature (Required) Today's Date