

# COMMISSION AGREEMENT

between

## MUTUAL MED

and

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**AGENT**

EFFECTIVE THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_  
(day) (month) (year)

1. Mutual Med will pay the Agent the attached schedule of commissions on business developed by the Agent and issued through Mutual Med. The commission schedule may be changed or amended from time to time by prior written notice.
2. Commissions will be paid on either the first or last business day (date to be determined by agent) of each month for as long as the business is in force and the premium is received prior to the first day of the month.
3. Commission amounts will accumulate until they reach a minimum of \$100.00. Payment will be released at that time or once annually if the minimum is not reached.
4. The compensation payable to the Agent in any commission period will be net amount determined by applying the commission table to the business on which premium is paid less any charge backs.
5. This contract shall remain in force as long as the Agent is actively engaged in servicing the business on which commissions are being paid. You will not be considered to meet this requirement unless you provide Mutual Med with a current copy of your E&O declarations page and a valid Life & Health Insurance license for all states in which you have written business.
6. The Agent may not assign or encumber commissions payable under this contract without the prior written consent of Mutual Med.

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**AGENT SIGNATURE**

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**TODD C. VERSHAW, President**

Address \_\_\_\_\_

**For Office use only:**

\_\_\_\_\_

MMI Agent Number \_\_\_\_\_

Phone \_\_\_\_\_

MMI Acct. Executive \_\_\_\_\_