

The Comprehensive Financial Planning System

Associate Planner Application and License Agreement

Name _____ Manager's Name _____
 Address _____ Primary Insurance Company _____
 City _____ State _____ Zip _____ Broker Dealer _____
 Business Phone(____) _____ FAX (____) _____ How many years experience do you have in insurance, securities,
 Email address _____ or other financial services? _____ years

Licenses Held: Life Health Variable Contracts Series 6 Series 7 Series 22

Please indicate the type of affiliation with T & M Financial, Inc. you desire:

T & M Financial Associate Planner – CFPS material and initial supplies are provided with no monthly charges if you are contracted through companies which list T & M Financial, Inc. or Richard L. Miller as your brokerage general agent. The undersigned agrees to pay T & M Financial, Inc. the amount, if any, shown in the table below by January 30th of each year.

<u>Previous 12 Months PFYC* Through T & M</u>	<u>CFPS Fees Due</u>
\$10,000 & over	\$0
1 to 9999	\$11,400 Less (Percentage of requirement met times \$11,400)
none	\$11,400

If the Associate Planner has been under contract with T & M Financial for less than 12 full months as of January 1st, the above PFYC amounts and fees due are pro-rated based on actual time under contract (i.e. 6 months service requires 50% of the above listed production and costs 50% of the fees shown). If this license agreement is terminated before 12 months, the undersigned agrees to pay the full \$11,400 fee regardless of commissions issued.

*Paid first year commission.

Non-Affiliated Representative – If you are not producing business through T & M Financial, Inc. CFPS materials and initial supplies are provided for \$950 per month until this agreement is cancelled by either party, with a minimum term of 12 months (\$11,400 total). If, during the first 12 months any payment becomes more than 30 days past due, the undersigned agrees to pay T & M Financial, Inc. the balance due immediately upon demand.

Your signature below also indicates your understanding of and agreement to the following terms:

1. You are granted a license to use all materials contained in the CFPS for the sole purpose of providing financial planning services to customers until this authorization is revoked, in writing, by T & M Financial, Inc.
2. Your license to use the CFPS expires 10 days after any payment due T & M Financial, Inc. remains unpaid.
3. T & M Financial, Inc. reserves the right to cancel the license of any user at any time, with or without cause.
4. CFPS material, illustrations, and recommendations may not be used in any form after your license to use the CFPS has expired or been canceled.
5. You may not transfer or give copies of any CFPS material to anyone other than your customers without prior written consent from T & M Financial, Inc.
6. You are responsible for obtaining the proper licenses and registrations required in your State to use CFPS material and to call yourself a Financial Planner. All CFPS users are required to register as an Investment Advisor.
7. You are an independent contractor and nothing in this or any other agreement shall be construed to create an employee/employer relationship with T & M Financial, Inc.
8. You agree to indemnify T & M Financial, Inc. and hold us harmless from all losses, expenses, costs, or damages we incur resulting from your acts or omissions.
9. T & M Financial, Inc. reserves the right to decline to work on any case submitted. While we always endeavor to prepare top quality plans, we cannot guarantee the accuracy of any plan prepared.
10. The undersigned agrees to thoroughly study all CFPS materials and to adhere to only the highest standards of professional conduct in dealing with clients and prospective clients.

Your signature _____ Date _____

For T & M Financial, Inc. _____, _____ Title _____ Date _____