

Brokerage Summary & Fee Disclosure Report



Policy Owner: John Sample
Insured: John Sample
Policy #: 1234567
Face Amount: \$1,000,000
Insurance Co.: ABC Insurance Co.



Dear Producer,

We would like to thank you for choosing Veris Settlement Partners, Inc. as your life settlement brokerage firm. We value your business and the opportunity to help you utilize the secondary market for life insurance policies to achieve your client's financial planning objectives.

Please review the accompanying *Brokerage Summary and Fee Disclosure Report*. This outlines in detail the provider sources that we contacted and a summary of all offers, counteroffers, or declinations. This highlights the thoroughness of our brokerage efforts and ensures that the highest possible offer is obtained.

Also included is a report summarizing Veris' fee schedule and detailed outlined of all commissions distributed in conjunction with this transaction.

Please have these documents sign and date by both you and the POLICY OWNER(S). Executed copies of these disclosures should be faxed to 240-314-0751 or e-mailed to jyoung@go2veris.com. Upon receipt, we will order closing documents from the provider.

Again, thank you for partnering with Veris Settlement Partners. Please contact us if you have any further questions or comments regarding this life settlement case.

Best regards,

Veris Settlement Partners, Inc.



Policy Insured:	John Sample	Policy Owner:	John Sample
Policy #:	1234567	Insurance Company:	ABC Insurance
Death Benefit:	\$1,000,000	Client Settlement Offer:	\$150,250

Settlement Offer Disclosure

Veris Settlement Partners, Inc. (VSP) provides the following life settlement offer for the above referenced case. Please be advised that the offered price may change in the event that this offer is not accepted within five business days of this notice. The offer is subject to final review of closing documents, life expectancy reports, policy illustrations, identification documents, original policy, trust documents, and any other documents and information deemed necessary to complete the purchase of the policy by the purchasing entity.

Acceptance of Offer

Producer's signature below indicates that he has disclosed bids to the policy owner and indicates the policy owner's acceptance of the offer. In signing this Acceptance of Offer on behalf of the policy owner, the producer acknowledges that his role and that of VSP, is to act as an agent of the policyholder in negotiating the sale of the policy and solely represent the owner in this transaction. The purchasing entity does not represent the policy owner in this transaction; nor is it affiliated in any way with VSP. Policy owner acknowledges that VSP is not responsible for any failure on the part of a potential buyer to purchase the policy on the terms offered by the potential buyer through VSP. Policy Owner acknowledges that VSP is not responsible for the accuracy of any representation made by the potential buyer of the policy and policy owner will look solely to the potential buyer in the event that the policy owner believes that a potential buyer has made misrepresentations to the policy owner or otherwise failed to perform on purchase offers or other matters.

Please sign and fax to 240-314-0751.

Print Producer Name: _____

Producer Signature: _____

Date: _____

Policy Brokerage Summary Report

Insured: John Sample
Policy Owner: John Sample

Death Benefit: \$1,000,000
Cash Surrender Value: \$22,500



Provider	Policy Insured	Date Submitted	Date of Offer	Initial Offer	Revised Offer	Final Offer	Date Accepted	Note
Provider 1	John Sample	4/20/2007	5/15/2007	\$195,000.00				5/15 - Bob said best they could do is \$195.
Provider 2	John Sample	4/20/2007	5/13/2007	\$0.00				5/13 - Can not compete with high offer.
Provider 3	John Sample	4/20/2007	4/20/2007	\$0.00				Not licensed in VA.
Provider 4	John Sample	4/20/2007		\$0.00				Did not respond
Provider 5	John Sample	4/20/2007	5/9/2007	\$0.00				5/9 - Can not compete with high offer
Provider 6	John Sample	4/20/2007	4/20/2007	\$0.00				Too small
Provider 7	John Sample	4/20/2007		\$0.00				Did not respond
Provider 8	John Sample	4/20/2007	5/16/2000	\$200,000.00				\$200 top offer
Provider 9	John Sample	4/20/2007		\$0.00				No response
Provider 10	John Sample	4/20/2007	5/7/2007	\$180,000.00				Could not compete with new offers
Provider 11	John Sample	4/20/2007	5/10/2007	\$0.00				Can not compete with high offer.
Provider 12	John Sample	4/20/2007						5/16 - Still in pricing
Provider 13	John Sample	4/20/2007	4/20/2007	\$0.00				Below \$1M limit.
Provider 14	John Sample	4/20/2007	4/31/2007	\$0.00				4/31 - Can not bid due to conflict with smoker status.
Provider 15	John Sample	4/20/2007	4/20/2007	\$0.00				Not in parameters
Provider 16	John Sample	4/20/2007	5/15/2007	\$171,468.00	\$189,886.00			Could not offer more.
Provider 17	John Sample	4/20/2007	5/20/2007	\$0.00				5/20 - Per Nick, can't compete. 4/30 - Currently reviewing
Provider 18	John Sample	4/20/2007		\$0.00				Did not respond

Policy Brokerage Summary Report

Provider 19	John Sample	4/20/2007	4/30/2007	\$0.00				4/30 - No VA license
Provider 20	John Sample	4/20/2007	5/16/2007	\$190,000.00	\$200,000.00	\$205,000.00	5/17/2007	Offer accepted
Provider 21	John Sample	4/20/2007	5/2/2007	\$0.00				5/2 - No VA Cases.
Provider 22	John Sample	4/20/2007		\$0.00				No response
Provider 23	John Sample	4/20/2007		\$0.00				No response
Provider 24	John Sample	4/20/2007	5/2/2007	\$0.00				5/2 - No VA cases.

Policy Owner(s) (Print Name): _____

Policy Owner(s) (Signature): _____ **Date:** _____

Producer(s) (Print Name): _____

Producer(s) (Signature): _____ **Date:** _____



Fee Schedule & Disclosure

Policy Insured: John Sample

Policy Owner: John Sample

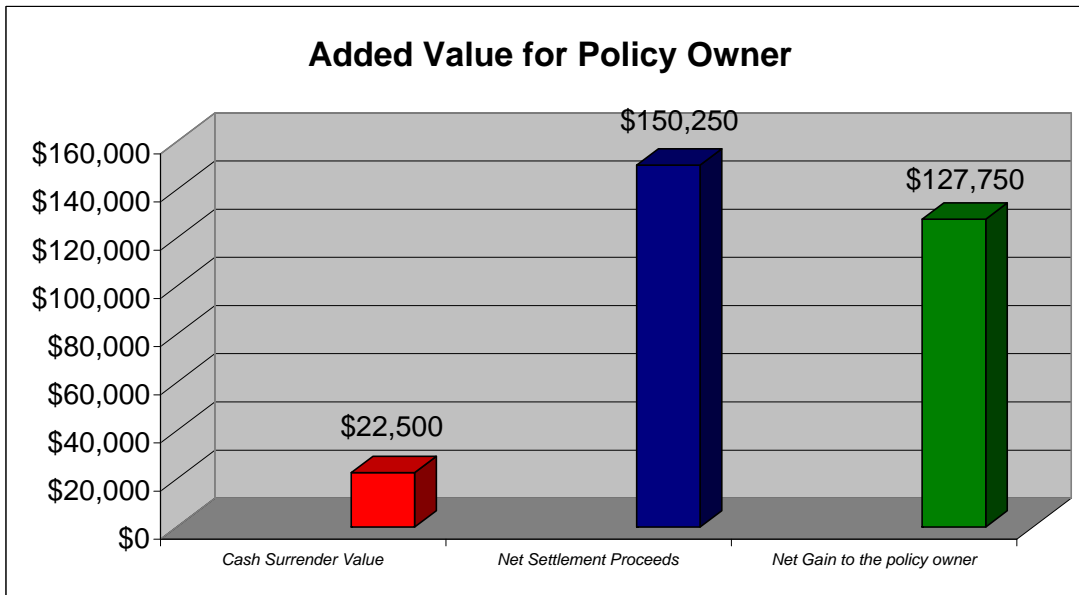
Fee Schedule:

Total transaction fees can never exceed the lesser of 30% of the gross offer or 8% of the face amount of the policy. Veris Settlement Partners, Inc. (VSP), the life settlement broker, will receive a fee equal to the lesser of 10% of the net offer (gross offer - cash surrender value) or 2% of the policy face amount. Referring advisors are entitled to fees in excess of VSP's fee up to the maximum levels stated above. Additionally, the following minimum fee levels apply based on the policies face amount.

<u>Face Amount</u>	<u>Minimum Fees</u>
\$249K or less	\$2,500
\$250K to \$499K	\$5,000
\$500K to \$999K	\$7,500
\$1M >	\$10,000

Fee Disclosure:

Face Amount:	\$1,000,000	<u>% of Face Amount vs. % of Gross Offer Test</u>
Cash Surrender Value (CSV):	\$22,500	30% of Gross Offer \$54,750
Gross Settlement Offer:	\$205,000	8% of Face \$80,000
Net Offer(Gross Offer - CSV):	\$182,500	
VSP Fee (10% of Net Offer)	\$18,250	<u>Fee Sharing:</u>
Advisor Fee	\$36,500	Veris Settlement Partners \$18,250
Total Fees	\$54,750	Advisor Partner \$36,500
Net Settlement Proceeds to the Policy Owner	\$150,250	
Net Increase to the policy owner	\$127,750	



Policy Owner(s) (Print Name): _____

Policy Owner(s) (Signature): _____ **Date:** _____

Producer(s) (Print Name): _____

Producer(s) (Signature): _____ **Date:** _____