

## Legal Questions for Contracting and Appointment Requests

Please answer the following questions. If you answer YES to any question, provide a full, detailed explanation including specific dates.

Name: \_\_\_\_\_

1	Have you ever been charged or convicted of, or pled guilty or no contest to, any felony, misdemeanor, federal/state insurance and/or securities or investments regulations or statutes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1A	Have you ever been convicted of, or pled guilty or no contest to, any Felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1B Have you ever been convicted of, or pled guilty or no contest to, any Misdemeanor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1C Have you ever been convicted of, or pled guilty or no contest to, a violation of federal or state securities or investment related regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1D Have you ever been convicted of, or pled guilty or no contest to, a violation of state insurance department regulation of statute?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1E Has any foreign government, court, regulatory agency, or exchange ever entered an order against you related to income investments or fraud?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1F Have you ever been charged with a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1G Have you ever been charged with a misdemeanor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1H Have you ever been on probation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Have you ever been, or are you currently being, investigated, have any pending indictment, lawsuits, or have you ever been in a lawsuit <b>with an insurance company</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2A	Are you currently under investigation by any legal or regulatory agency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2B Have you been under investigation by any insurance company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2C Have you ever been, or are you currently, involved in any pending indictments, lawsuits, civil judgements or other legal proceedings (civil or criminal) (you may omit family court)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2D Have you ever been named as a defendant or codefendant in a lawsuit, or have you ever sued or been sued by <b>an insurance company</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you ever been alleged to have engaged in any fraud?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Have you ever been found to have engaged in any fraud?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Has any insurance or financial services company or broker-dealer terminated your contract or appointment or permitted you to resign for reason <b>other than lack of sales</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5A	Were you fired because you were accused of violating insurance or investment related statutes, regulations, rules, or industry standards of conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	5B Were you fired because you were accused of fraud or the wrongful taking of property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	5C Failure to supervise in connection with insurance or investment related statutes, regulations, rules, or industry standards of conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Have you ever had an appointment with any insurance company denied or terminated for cause? <b>(if you have been reported to Vector One, answer yes)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Does any insurer, insured, or other person claim any commission chargeback or other indebtedness from you as a result of any insurance transactions or business? <b>(if you have been reported to Vector One, answer yes)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No