



Building a better future, together.

**BENEFIT PROFESSIONALS, INC.
PROPOSAL DATA REQUEST FORM**

Attn: Terri White-Miholits, Jeff Todd, or Lori Kilpatrick

Phone (800) 545-6741 or fax (888) 336-1120

e-mail: miholits@benefitpros.com/lkilpatrick@benefitpros.com, or call Jeff Todd (239)-281-1449

Broker/Consultant Name: _____

Licensed in State of Solicitation? Yes No Broker/Dealer: _____

Business Name (if different from Broker / Dealer): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ e-mail Address: _____

PLAN INFORMATION:

Plan Sponsor: _____

State Headquarters Located: _____ Number of Employees: _____

Estimated Annual Plan Deposits: \$ _____ Plan's Original Effective Date: _____

Complete Additional Information if an Existing Plan:

Plan Name: _____

Amount Current Plan Assets \$ _____ Number of Plan Participants: _____

Where Are Assets Now _____ Proposed Transfer Date: _____

Is There A Cost Involved in Liquidating Current Assets? Yes No If Yes, Amount \$ _____

VENDOR AND COMPENSATION INFORMATION : Requested Compensation _____

Preferred Vendor: Nationwide John Hancock Transamerica
 Open Architecture ASpire Other _____
 American Funds ING Mutual of Omaha Other _____

DATE PROPOSAL IS NEEDED: _____

Number of Proposals for Client: _____ Number of Broker Copies _____

Comments: _____

**If you have any questions, please call. Thank you for considering our services and Good Luck!
Benefit Professionals, Inc. 302 East Main Street, P.O. Box 1789, Albertville, AL 35950**