

901 E. St. Louis Street  
Suite 205  
Springfield, MO 65806  
<http://www.ciusgf.com>

Telephone (417) 883-3277  
Facsimile (417) 883-3393  
(800)241-9759

Date:

Policy Number: \_\_\_\_\_

Insured: \_\_\_\_\_

KANSAS AGENTS SERVICE CONTRACT

The undersigned insured hereby engages the services of David W. Hinrichs, a licensed Kansas insurance agent, license #328-42-3696, as his/her agent for securing, negotiating, and procuring the placement of the following described insurance coverages and to assist the undersigned in the preparation of any and all applications, underwriting data, and other information required by an insurer for the purposes of issuing an insurance policy within the state. The insurance coverage requested is: \_\_\_\_\_

The undersigned insured authorizes the agent to commit to a maximum premium of not more than \$ \_\_\_\_\_ per year for the above stated coverage. The undersigned insured agrees to pay as compensation to the agent, above and in addition to the commission received from the insurer, for the various services of the agent, a fee of not more than \$ \_\_\_\_\_ dollars.

A brief description of those agents services performed and not described in paragraph 1 above is: Underwrite, procure and issue policy.

This agreement is in furtherance of 40-4911, Chapter 40 – Insurance – Article 49 – UNIFORM INSURANCE AGENTS LICENSING ACT – Compensation Agreements; Kansas Department of Insurance.

Dated: \_\_\_\_\_

Insured

Dated: \_\_\_\_\_

Agent