

International Netting Transmittal

Brokerage/Agency Name		Brokerage/Agency #	
Name of Insured/Applicant			
Product		Face Amount	
Gross Target Premium	Total Collected	Total Retained	Total Submitted*
*The policy fee <input type="checkbox"/> \$45 for Universal Life <input type="checkbox"/> \$100 for Term is included in the amount submitted.			
Broker 1 Information: Name	Broker Number	Policy Percentage	Commissions Retained
Broker 2 Information: Name	Broker Number	Policy Percentage	Commissions Retained
Prepared By _____ Date _____			