APPLICATION PRINTING CHECK LIST

1. ***Print this document***
2. ***After print the applications, take a photo of this document and text it to your manager.***

Completed		Print Yes/No	Carrier	Product	Product Type
		NO e-app only	*Americo*	*TERM 125 & CBO 100*	*Term / Cash Back*
		NO e-app only	Americo	ADB (Accidental Death) (use same app as HMS 125)	*Accidental Death*
		Yes	*CFG Columbia Financial Group*	*Safeshield Term*	*Term*
		Yes	*CFG Columbia Financial Group*	*Dignified Choice*	*Whole Life*
		Yes	*Foresters*	*Strong Foundation*	*Term*
		Yes	*Foresters*	*Smart UL*	*UL/Permanent*
		Yes	*Foresters*	*Questionnaires for Term & UL*	
		Yes	*Foresters*	*PlanRight*	*Whole Life*
		Yes	*MoO – Mutual of Omaha*	*Term Life Express Simplified Issue*	*Term*
		Yes	*MoO – Mutual of Omaha*	*Living promise*	*Whole Life*
		Yes	*MoO – Mutual of Omaha*	*Children's Whole Life*	*Whole Life*
		Yes	*TransAmerica*	*Final Expense (Immediate Solutions)*	*Whole Life*

Agent Name: _____ Equis Agent #: EF_____

Today's Date: _____

My resident state is: _____