

GROUP-SPONSORED E&O PROGRAM

Policy # MKLM7PLCA00112 ENROLLMENT PREMIUM TABLE

Policy Period: January 1, 2025 to January 1, 2026

LEVEL	LIMIT EACH CLAIM/ ANNUAL AGGREGATE	RATE*
Level A	\$1,000,000/\$1,000,000	\$401
Level A	\$1,000,000/\$2,000,000	\$430
Level A	\$1,000,000/\$3,000,000	\$434
Level A	\$2,000,000/\$2,000,000	\$464
Level B	\$1,000,000/\$1,000,000	\$454
Level B	\$1,000,000/\$2,000,000	\$494
Level B	\$1,000,000/\$3,000,000	\$498
Level B	\$2,000,000/\$2,000,000	\$536
Level C	\$1,000,000/\$1,000,000	\$295
Level D	\$1,000,000/\$1,000,000	\$377

LEVEL A	Sale & servicing of life insurance, fixed and indexed annuities, final expense, mortgage life, Medicare Supplement/Advantage insurance, LTC, disability, and health insurance.
LEVEL B	Level A plus Series 6.
LEVEL C	Medicare Supplement/Advantage insurance and final expense only.
LEVEL D	Level A new agents coverage (if licensed less than 2 years).

*Rates include \$12 administration and \$104 sponsor affiliation fee.

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