

Advisor information for clients concerning Nancy Ackert May 2011

About me: I am a life insurance and financial advisor holding a life and mutual funds license for the province of Ontario.

Companies I represent: I represent several companies recommending their various tools when the situation warrants them – life insurance, disability, critical illness, long term care, family & group benefits, segregated funds, guaranteed investment options.

My goal: is to do what is in your best interest

Nature of relationship with company(ies) I represent: No insurer holds an ownership interest in my business, nor do I hold a significant interest in any insurance company

Compensation: If you choose to purchase a product through me, I will be paid by the company that offers that product. I am compensated by a sales commission for most products at time of placement, and may receive a renewal commission if you retain that policy with the company. For certain products, I may receive a referral fee. I may also be eligible for additional compensation, such as bonuses and non-monetary benefits, such as travel incentives and may be entitled to participate in a share purchase plan. This compensation depends on various factors such as the volume or retention of business I place with a particular company during a given period of time. **Time and mileage** – will apply if above does not occur.

Conflict of interest: I take the potential of a conflict of interest seriously. I will notify you if there is a conflict of interest of which I become aware in regards to recommendations to you. My overall recommendation will take into consideration, and will be based on my analysis of your financial security needs.

This statement has been prepared by Nancy Ackert and Nancy Ackert alone is responsible for its accuracy.

ACKNOWLEDGMENT

I _____ have been informed of, and understand the implications of, this disclosure including any conflict of interest or potential conflict of interest associated with Nancy Ackert in relation to any recommendations made.

I agree to continue discussions with you and understand that I may ask for further information regarding this disclosure.

Client signature _____

Date _____