Using iPipeline's iGO e-Application with Foresters Financial -BrightFuture





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- **1.** Using the iPipeline iGO e-App
- 2. Pre-screen
- **3.** iPipeline's iGO e-App Process



Using iPipeline's iGO e-App

Using iPipeline's iGO e-App¹



- e-App is available in all states (except NY), through the iPipeline iGO e-App platform using Microsoft Edge (desktop/laptop) or Safari (Apple iPad[®] only).
 Foresters Financial[™] does not support using Chrome or Firefox
- PlanRight is not available on the iPipeline iGO platform. For more information on how to access the Apptical LiveApp for PlanRight, contact the Sales Desk at 866 466 7166, Option 1
- BrightFuture is available in all states except CA, NY & WA

¹ Insurability depends on answers to medical and other application questions and underwriting searches and reviews [®] Apple and iPad are registered trademarks of Apple Inc.

Using iPipeline's iGO e-App



- Get a POS decision¹ email in less than 10 minutes for all electronically submitted Foresters non-medical products (does not apply to medical products). Decision will either be:
 - Medically Eligible
 - Refer
 - Issued
 - Declined
- Calling Apptical for a POS decision is for PlanRight only
- To lower the likelihood of a "Refer" decision, make sure that the information being entered on the e-App is accurate (such as SSN, address, DOB etc.)

¹ POS decision for non-medical products will be unavailable Monday to Saturday from 2:00 a.m. to 6:00 a.m. and from Saturday 10:00 p.m. to Sunday 10:00 a.m. (ET)



Pre-Screening

Pre-screening



To submit the application electronically you and each signing party must have a separate email address. You cannot create their email address or use your email address or use an email address you have access to. Each signing party must be able to receive emails at their own email address and open links in an email to access documents, such as PDFs

Payer or Owner cannot be a Trust or a corporation*

For juvenile SMART UL and Advantage Plus II cases, the Owner must be the Parent or Legal Guardian*

For BrightFuture, the Owner must be a Parent, Grandparent or Legal Guardian except in PA where the Owner can only be a Parent or Legal Guardian

Except for medical products, First Premium on PAC (FPOP) for the initial premium and Draft via Pre-Authorized Check (PAC) for subsequent premiums (no direct bill) are the only allowable payment options available for e-App*

* For cases that do not meet the criteria above, please proceed with writing the application on paper

Pre-screening



For BrightFuture only, the Owner must be the Payer

The Payer must be an account holder of the bank account from which premium will be drafted

If banking information is provided, it must be valid in order to proceed with the e-App

Credit, Debit, Pre-Paid cards, money orders or cashier's checks are not valid forms of premium payments (for e-App or a paper application). For medical products only, if a personal check is to be used for payment, do not send the check to Foresters after submitting the e-App. The personal check will be collected upon certificate delivery

Except for BrightFuture, up to five (5) primary and three (3) contingent beneficiaries can be named*

* For cases that do not meet the criteria above, please proceed with writing the application on paper For additional information, refer to the e-App Overview on ezbiz, Foresters producer website

Pre-screening



For BrightFuture, the Owner will be the primary beneficiary unless another is listed. A contingent beneficiary cannot be designated in the application but can be added after issue by submitting a signed Beneficiary Change form found on ezbiz, Foresters producer website

For BrightFuture e-Apps, replacements are not allowed*

* For cases that do not meet the criteria above, please proceed with writing the application on paper For additional information, refer to the e-App Overview on ezbiz, Foresters producer website





- Specific state variations not covered in this presentation
- State forms automatically triggered within e-App
- Follow the yellow brick road a yellow box requires completion; whereas a white box is not required but provides helpful information to accelerate the underwriting process

 For each screen, if all required information is provided you will see a green checkmark. If required information is missing, you will see a red question mark





- e-App Launch
 - 1. Logon to your agency's website OR logon to ezbiz, Foresters producer website (https://ezbiz.foresters.com)
 - 2. Click the *e-App* button
 - 3. Either Select:
 - Start New Case: which allows you to begin a new e-App; or
 - View My Cases: which allows you to view recent cases





View My Cases

- Dashboard
 - Lists all your cases
 - Case remains active for **120** days from last review
 - Search or sort feature helps identify cases
 - Status column helps manage cases

Vierts (
4	Name	Sales Ø		Carrier	Product +	Date Modified	View Forms	Case Actions	
4	JBA fifty five Feb seventeen Kann Face Ansurt \$150,000 Care briefs	Awating Consume e Signatur	H	Foresters Financial	Advantage Plus	2/17/2016		Case Actions	
*	TDown Feb eleven, Karen JRA 53 one broaser open Face Amount: \$150,000 Case Deals	Awaiting Consume e Signatur	N	Foresters Financial	Advantage Plus	2/11/2016		Case Actions	
*	CTR Test Three, Karen Locked.5 bene and 4 children Face Amount: \$150.000 Gase Desith	Awating A + Signific		Foresters Financial	SAMART UL	1/12/2017		Case Actions	
s 234			Page 1 of		a page:	Date	View		
s (234) Name Doe, Jo			Carrier Fores	Product sters % BrightFut	ure - Non-	Date Modified+ 7/22/2020	View Forms	Case Actions Case Actions	•
Name	hn	Status 0	Carrier	Product sters % BrightFut		Modified-	Forms		*
Name Doe, Jo Case Di SMART Test, Cl	hn S tails UL Non Med Regression / erryl ount: \$100,000	Status 0	Carrier Fores Financ	Product sters 'r BrightFut ial BrightFut medical sters 'r SMART UI		Modified-	Forms		•
Name Doe, Jo Case Di SMART Test, Cf Face Am Case Di Sprint	hn S stalls UL Non Med Regression / hery/ C ount: \$100,000 stalls Six - Seven, Karen hount: \$150,000	Status () Started	Carrier Fores Financ Fores Financ	Product Sters & BrightFut medical sters & SMART UI ial SMART UI	ure - Non-	Modified - 7/22/2020	Forms	Case Actions	•
Name Doe, Jo Case Do SMART Test, Ch Face Am Case Do Sprint Case D Case D Sprint	hn Statistics of the second se	Status O Started Application e-Submitted	Carrier Fores Financ Fores Financ For	Product sters 'r medical ial sters 'r SMART ur ial sters 'r Adv mecial	ure - Non- L - Non-medical antage Plus II -	Modified- 7/22/2020 7/20/2020 7/16/20	Forms	Case Actions Case Actions	ions



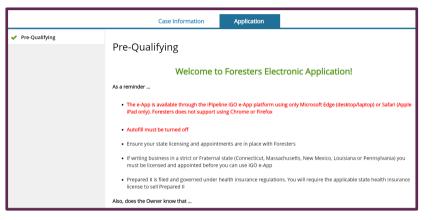
Start New Case

- Case Information
 - Proposed Insured: Enter the first and last name of one of the Proposed Insureds. Tip - do not enter Date of Birth or Gender on this screen as the product rules are not built in
 - Case Description (optional): Tip list the names of all Proposed Insureds (short form) so you can easily locate the case in the future
 - Carrier & Product:
 - Application Signed State: State where the Owner signs the e-App. You must be licensed in this state to proceed
 - Product Type: Select the Product Type, then click *Find Available Products*
 - Once the product is determined, click *Select* to launch e-App

		Case Info			
Status	Date Modified				
Started	07/14/2020				
Proposed Insured					
First Name			Last Name		
John			Doe		
Date of Birth	Age	Gender			
MM / DD / YYYY		Please select	•		
Case Description					
(Examples: \$500,000.00, kic Carrier and Product Application Signed State: Alabama	rs Policy, Business Policy, etc.	Product Type Whole Life		Y	Find Available Products
(Examples: \$500,000,00, Kic Carrier and Product Application Signed State: Alabama Product		Product Type Whole Life		Y	
(Examples: \$500,000.00, kic Carrier and Product Application Signed State: Alabama		Product Type		X	Find Available Products IGO e-App Select e-Sgan
(Examples: \$500,000.00, Kic Carrier and Product Application Signed State: Alabama Product Carrier • Foresters $rac{1}{2}$		Product Type Whole Life Product	M		iGO e-App Select



- Pre-Qualifying
 - Ensure you read this screen as these rules help determine whether your client qualifies for using the e-App
 - If they qualify, answer "Yes" at the bottom of this screen and proceed to the next screen
 - If they don't qualify, answer "No" at the bottom of this screen and proceed with writing the application on paper



Need Help? Want Training? Click on Foresters Financial ezbiz

I have read and agree that the above conditions are met to satisfy the requirements to complete an e-App and I further confirm each statement below is accurate:

O Yes O No

- If Pre-Authorized Check (PAC) is requested, I have confirmed with the Payer that they are an account holder of the bank account to be identified in the application from which premium will be drafted
- I understand that if the Owner and/or Payer is not me or a member of my immediate family, I cannot
 use my email address or set up an email address for the Owner and/or Payer and that the Owner
 and/or Payer must have their own email address for applying their e-Signature and to receive the
 required Point of Sale forms



- Pre-Qualifying Cont
 - Complete only for children who meet the eligibility requirements
 - Click "Click here to add..." for each eligible child. You can add up to six

Doe, John Foresters	BrightFuture - Non-medical		Save Case Action	IS V					
	Case Informat	ion Application							
Pre-Qualifying Pre-Qualifying, Cont	Pre-Qualifying, Co	nt							
	Medical Questions								
	Only children who meet the eligibil	ity requirements can be included i	n this application						
		for whom the answer to a medical o	ding these medical questions. Do not cor uestion would be "Yes", as that child wou						
	Has the Proposed Insured ever beer or been prescribed medication, or ir		dvised to receive treatment, medical care	e, or surgical ca					
	 a) A type of heart disease, birth defect, 	a) A type of heart disease, birth defect, Down's Syndrome, autism, a mental disorder or developmental problems?							
	b) A form of cancer, leukemia, Cystic Fi diabetes?	b) A form of cancer, leukemia, Cystic Fibrosis, chronic lung disease (excluding asthma), spinal atrophy, muscular dystrophy or diabetes?							
	c) A terminal illness or end-stage disea	c) A terminal lilness or end-stage disease? Within the past 5 years (60 months), has the Proposed insured had a diagnostic test; baen advised to get surgery, a medical procedure or a lab test (excluding tests related to Human Immunodeficiency Virus (HIV), or been referred to a doctor or medical specialist, and y divisit han or up teem started or completed or for whith the results are not yet immore.							
	procedure or a lab test (excluding tests								
	Proposed Insured								
	Please enter the Proposed Insured's th	at are eligible to apply by clicking on th	e grid below. Up to 6 may be entered.						
	First Name	Last Name	Date of Birth						
		No matching records found							
		Click here to add							
	Please list at least one Proposed	Insured							



- Proposed Insured Pop-Up
 - Complete all fields in the pop-up
 - Replacements are not allowed if using the e-App. If you answer "Yes" to either question the following red iMessage will appear "Unfortunately the requirements to complete an e-App have not been met. Please proceed with writing the application on paper"
 - Tip once the replacement questions have been answered, be sure to scroll down in the pop-up to see the "**Personal Details**" section, to enter the name of the eligible child

Proposed	Insured
Eligibility Requi	rements
Is the answer to an	y of the medical questions "Yes" for this Proposed Insured?
	Is the answer to any of the medical questions "Yes" for this Proposed Insured?
	O Yes ● No Date of Birth Age Last
	09 / 09 / 2004
	Will insurance applied for in this application replace, reduce coverage or modify premiums paid for any existing life insurance or an annuity in force?
	O Yes No
	Will a certificate applied for be a replacement for or a change to existing life insurance or an annuity?
	The Proposed Insured is eligible to apply for BrightFuture.
	 тне порозей пазней з ещине ко арру тог опдни ихите.
	Personal Details
	 Use proper capitalization throughout the e-App. Capitalizing the first letter of the Proposed Insured's first and last name will ensure the issue paperwork and subsequent correspondence meet the Owner's expectations
	First Name M.I. Last Name Suffix



- License and Appointment Check
 - Validate the product and application signed state. If either are incorrect, click *Back* to go back to the "**Case Information**" section to correct the state and/or product type
 - Enter your first and last name
 - Enter Agent # OR SSN number; only 1 required. Tip- entering Agent # helps to avoid delays and helps you get paid quicker
 - Click Validate to proceed
 - If you validate, the screen opens and you can proceed. If you don't validate, contact Foresters
 - You can split comp with 1 additional agent (Note: the comp split must equal 100% to proceed to the next screen). Answer "Yes" to more than one agent and complete information

 Pre-Qualifying 	Lineman and America	ture and Charal
 Pre-Qualifying, Cont 	License and Appoin	tment Check
 License and Appointment 		nroughout the e-App. Fields in yellow are mandatory
Owner Owner	Enter your Foresters agent num	ber to avoid delays and get paid quickly
Proposed Insured #1	Primary Agent Information	
Payment Information	Product Name	Application Signed State
Validate and Lock Data	BrightFuture - Non-medical	Alabama
	Agent First Name	Agent Last Name
	Forrest	Gump
	Agent #	
	8010049	
	Agent SSN % of Split	
	Validate	
	Will there be more than one Agent?	
	O Yes No	
	K Back Next >	



- Owner
 - Select the "Relationship to the Proposed Insured." You can choose:
 - Parent
 - Grandparent
 - Legal Guardian
 - Collect personal details about the Owner such as Name, DOB, Gender, Social Security Number, Citizenship, Address,
 - Email Address (optional): This field is for communications including about the benefits of Foresters membership; NOT

where you enter the email address in order to e-Sign the application

- Photo I.D. Information indicate the type of Photo I.D. used to verify the identity of the Owner (3 choices):
 - Driver's License
 - Passport
 - Other Government ID

							_
1	Pre-Qualifying	Owner					
~	Pre-Qualifying, Cont	Owner					
~	License and Appointment	 Click the "View Forms" to not, click on the "Case In 			ave the right application for the state	where the solicitation occurred. I	f
?	Owner			tab and re	-select the state		
	Proposed Insured #1	Relationship to the Proposed	Insured				
	Payment Information	Parent Grandparent					
	Validate and Lock Data	Legal Guardian					
		Owner (full legal name)					
		First Name		M.I.	Last Name	Suffix	
							~
		Date of Birth	Gender				
		MM / DD / YYYY	O Male	○ Female			
		Social Security No.					
		ls Owner a U.S. Citizen?					
		Photo I.D. Information					
		Indicate the type of Photo I.	D. used to v	erify identi	ty:		
		Туре:					
		V					



- Owner
 - Enter a Charity Benefit Beneficiary
 Designation (optional but this benefit is not paid if no eligible beneficiary is designated)

Additional Information			
I acknowledge that any Prop	osed Insured who is	s not a current Foresters member is applying for members	hip:
☑ Yes			
I elect to designate a seconda possible lapse in coverage)	ary addressee (Opti	ional. To designate another person to receive notification o	of a
Is a Charity Benefit Beneficia		ng made? n (applies to each certificate issued, if any, as a i	result of this
Charitable Organization Nam	ne:	Tax I.D. # (EIN):	
Number and Street:			
City:	State:	Zip:	



- Owner
 - Secondary Addressee Designation
 - Electing a secondary addressee is optional
 - Enter Addressee's name, gender and address

Pre-Qualifying	Secondary A	ddressee	Designatio	n		
Pre-Qualifying, Cont	becondary / a		Designatio			
License and Appointment	Addressee Informat	ion				
/ Owner						
Secondary Addressee Des	First Name	м.і.	Last Name		Gender	
Proposed Insured #1					⊖ Male	○ Female
Payment Information	Number and Street					
) Validate and Lock Data	City	State		Zip Code		
			\checkmark			
	A gray check mark l	beside Zip Code i Next 🔉	s a possible invalid add	dress, please review. An additi	onal check will	occur at Foresters



- Non-Residence Sale Declaration
 - Required if the state of solicitation is different than the state in which the Owner resides

 Pre-Qualifying Pre-Qualifying, Cont 	Non-Residence Sale Declaration
 License and Appointment 	Was the Owner solicited in connection with this Foresters application?
✓ Owner	Was the solicitation made in the state of residence of the Owner?
 Secondary Addressee Des 	
? Non-Residence Sale Decl	Please state reason(s) why solicitation did not occur in the state of residence of the Owner:
Proposed Insured #1	
Payment Information	
Validate and Lock Data	Kext >



- Proposed Insured #1 #6
 - Collect personal details about the Proposed Insured such as Name, DOB, Gender, Citizenship, Insurance Amount Applied For and Plan Type

Pre-Qualifying	Proposed In	sured #1	- lane	Doe	
 Pre-Qualifying, Cont 			J ==		
 License and Appointment 	Personal Details				
V Owner					
 Secondary Addressee Des 	· · · ·	the medical quest	ions "Yes" f	or this Proposed Insured?	
✓ Non-Residence Sale Decl	Yes No				
Proposed Insured #1	First Name		M.I.	Last Name	Suffix
Proposed insured #1	Jane			Doe	\checkmark
Payment Information	Date of Birth	Gender			
Validate and Lock Data	09 / 09 / 2004	O Male	○ Female		
	Is the Proposed Insure	d a U.S. Citizen?			
	O Yes O No				
	Insurance Amount App	lied For: \$			
	Plan Type:				
	O 10 Pay O Pay to 10				



- Proposed Insured #1 #6
 - Beneficiary Designation
 - By default, the Owner is designated as the Primary Beneficiary unless otherwise stated
 - If Owner would like to designate a different Primary Beneficiary, they can choose one that has already been named previously from the drop down or enter the details about a new Primary Beneficiary

Beneficiary Desi	gnation	
1 The Owner will	be the Primary Beneficiary, unless the beneficiary information is completed for the Proposed Insured	
Does the Owner war	nt to designate a different Primary Beneficiary for this Proposed Insured?	
	neficiary relationship meets Foresters fraternal and insurable interest guidelines. Depending on the ed, proof of insurable interest may be requested once the e-App is at Foresters	
Relationship to Prop	osed Insured	
Personal Detail	1 The Owner will be the Primary Beneficiary, unless the beneficiary information is completed for t	he Proposed Insured
First Name	Does the Owner want to designate a different Primary Beneficiary for this Proposed Insured?	
	A Ensure the beneficiary relationship meets Foresters fraternal and insurable interest guidelines. relationship selected, proof of insurable interest may be requested once the e-App is at Foresters	Depending on the
	Enter a previously named Beneficiary?	
	Beneficiaries previously entered: William Doe	



- Proposed Insured #1 #6
 - Other Insurance
 - Answer "Yes" or "No" to the question "Does the Proposed Insured currently have any life insurance or an annuity in force?" If "Yes" enter the total amount and complete the "Important Notice: Replacement form" section
 - Important Notice: Replacement form
 - Click the *Important Notice: Replacement form* hyperlink first in order to activate the screen

es the Proposed Insured currently have any life insurance or an annuity in force? Image: The proposed Insured Currently have any life insurance or an annuity in force? Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the total amount in force: Image: The proposed Insurance or an annuity in force, indicate the Important Notice: Replacement form read aloud. Regardless of their answer, click the link below to open the "Important Notice: Replacement form" and activate the questions Image: The proposed Insurance or an annuity in the proposed Insuranc		
portant Notice: Replacement form Be sure to ask the Owner if they would like the Important Notice: Replacement form read aloud. Regardless of their answer, click the link below to open the "Important Notice: Replacement form" and activate the questions	· · ·	d insured currently have any life insurance of an annuity in force?
Be sure to ask the Owner if they would like the Important Notice: Replacement form read aloud. Regardless of their answer, click the link below to open the "Important Notice: Replacement form" and activate the questions	If there is life in	surance or an annuity in force, indicate the total amount in force:
Be sure to ask the Owner if they would like the Important Notice: Replacement form read aloud. Regardless of their answer, click the link below to open the "Important Notice: Replacement form" and activate the questions		
answer, click the link below to open the "Important Notice: Replacement form" and activate the questions		
voortant Notice: Replacement form"		
anortant Notice: Replacement form"		
ipor une receive replacement form	answer, click th	e link below to open the "Important Notice: Replacement form" and activate the questions
is the Important Notice: Replacement form read aloud?	answer, click th	e link below to open the "Important Notice: Replacement form" and activate the questions
Yes ONO	answer, click th	e link below to open the "Important Notice: Replacement form" and activate the questions



- Payment Information
 - Payer is always the Owner
 - First Premium on PAC (FPOP) for the initial premium and Draft via Pre-Authorized Check (PAC) for subsequent premiums (no direct bill) are the only allowable payment options available
 - A Specific Draft Day can be selected (from 1-28)

Pre-Qualifying	
Pre-Qualifying, Cont	Payment Information
License and Appointme	Payer is the Owner
Owner	First premium payment to be made by:
	Draft via Pre-Authorized Check (PAC)
 Secondary Addressee D 	Subsequent premium payments made by:
Non-Residence Sale Deeperture	PAC V
 Proposed Insured #1 	Payment mode:
Payment Information	
Validate and Lock Data	Specific Draft Day?
	Yes
	Oko (draft first premium immediately upon Foresters application approval)
	PAC Banking Information
	Banking information provided must be valid in order to proceed with the e-App. Credit, Debit and Pre-Paid cards are not valid forms of priminup partnet. Name of Financial Institution
	Routing Transit # (9 digits):
	Account # (maximum 17 digits):
	A If the Account # provided is more than 17 digits, please ensure it is for a valid bank account and NOT a Credit, Debit or Pre-Paid card
	Account Type:
	Automatic Premium Loan
	Automatic Premium Loan Provision Elected?
	Yes, overdue premium on each certificate issued will be paid through a loan against, and for as long as there is, available cash value, if any, on that applicable certificate.
	□ No, or if an election is not made, a certificate's Nonforfeiture provisions will automatically apply, if premium is overdue at the end of the Grace Period.
	< Back Next >



- Payment Information
 - When banking information is provided it must be valid in order to proceed
 - Click Validate to validate banking information
 - Credit, Debit and Pre-Paid cards are not valid forms of premium payment (not for paper applications either!)
 - NOTE: If the banking information cannot be validated, confirm entry and proceed with the e-App. The banking information will be validated by the bank once the case is issued

Pre-Qualifying	
Pre-Qualifying, Cont	Payment Information
License and Appointment	Payer is the Owner
Owner	First premium payment to be made by:
Secondary Addressee Des	Draft via Pre-Authorized Check (PAC)
Non-Residence Sale Decl	Subsequent premium payments made by:
	PAC
Proposed Insured #1	Payment mode:
Payment Information	
Validate and Lock Data	Specific Draft Day?
	Yes
	No (draft first premium immediately upon Foresters application approval)
	PAC Banking Information
	(i) Banking information provided must be valid in order to proceed with the e-App. Credit, Debit and Pro-Paid cards are not valid forms of premium payment.
	The concernes are not only as between high-next
	Name of Financial Institution
	Wells Kargo
	Routing Transit # (9 digits):
	12219985
	Account # (maximum 17 digits):
	1234
	Name of Financial Institution
	A If the Account * p NDT a Credit, Debit or Well's Fargo
	Routing Transit # (9 digits):
	Cick the "Validate 122199983
	Account # (maximum 17 digits):
	Validate 1234
	Account Type:
	Creating Swin
	Automatic Pren
	Automatic Premis Validate
	Over, overdue pre available cash value A Unable to validate banking information. Confirm entry and proceed with the e-App
	No. or if an elect oversitue at the end. Account Type:
	Checking Savings



- Validate and Lock Data
 - One or more red question marks on the left navigation tree lets you know the documents are incomplete and it is "Not in Good Order (NiGO)"
 - Revisit and complete the required fields and proceed back to this screen
 - Click Return to Incomplete Sections of the Application to revisit and complete the required fields. Once you have, proceed back to this screen

then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part	 Pre-Qualifying 	
Owner Owner You may choose one of the following options: Non-Residence Sale DecL Proposed Insured #1 Payment Information Xor Print the documents, click "View Forms" at the top of the screen. Click "Save Niew as PDF" then "Open." Click "File" then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part then printed application from Foresters Financial as you nor	 Pre-Qualifying, Cont 	Validate and Lock Data
Secondary Addressee Des You may choose one of the following options: Non-Residence Sale DecL Proposed Insured #1 To be considered in < Good Order, click the screen(s) marked 2 in the left-hand navigation tree and Complete the required fields highlighted in yellow. To Save the documents for completion at a later time, click the "Save" button at the top of the screen. To Payment Information Validate and Lock Data You find the documents, click "View Forms" at the top of the screen. Click "Save/View as PDF" then "Open." Click "File" then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part.	 License and Appointment 	The documents are incomplete and not in Good Order
 Non-Residence Sale Deck Proposed Insured #1 To be considered in Good Order, click the screen(s) marked 2 in the left-hand navigation tree and Complete the required fields highlighted in yellow. To Save the documents for completion at a later time, click the "Save" button at the top of the screen. To Save the documents, click "View Forms" at the top of the screen. Click "Save/View as PDF" then "Open." Click "File" then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part to print click and Lock Data 	✓ Owner	
 Proposed Insured #1 2. To Save the documents for completion at a later time, click the "Save" button at the top of the screen. Payment Information 3. To Print the documents, click "Yew Forms" at the top of the screen. Click "SaveView as PDF" then "Open." Click "File" then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part the printed application from Foresters Financial as you nor 	 Secondary Addressee Des 	You may choose one of the following options:
Proposed Insured #1 2. To Save the documents for completion at a later time, click the "Save" button at the top of the screen. 3. To Print the documents, click "View Forms" at the top of the screen. Click "Save/Niew as PDF" then "Open." Click "File" then "Print." Complete the remaining sections of the paper application, obtain any other supplemental forms not part Validate and Lock Data	✓ Non-Residence Sale Decl	
 Payment Information 3. To Print the documents, click 'View Forms' at the top of the screen. Click 'Save/View as PDF' then 'Open.' Click 'File' then 'Print' Complete the remaining sections of the paper application, obtain any other supplemental forms not part the printed application from Foresters produce portal. Collect all signatures and send to Foresters Financial as you nor 	Proposed Insured #1	
Validate and Lock Data the printed application from Foresters producer portal, collect all signatures and send to Foresters Financial as you nor	? Payment Information	3. To Print the documents, click "View Forms" at the top of the screen. Click "Save/View as PDF" then "Open." Click "File" and
	 Validate and Lock Data 	the printed application from Foresters producer portal, collect all signatures and send to Foresters Financial as you normally
Return to Incomplete Sections of the Application		Return to Incomplete Sections of the Application
		S Dack
< Back		



- Validate and Lock Data
 - All green check marks let you know the documents are complete and is "in Good Order (iGO)"
 - Click Lock Documents and Proceed to the Signature Process to begin the e-Sign process

 Pre-Qualifying 	Validate and Lock Data
 Pre-Qualifying, Cont 	Validate and Lock Data
 License and Appointment 	Congratulations The documents are complete and in Good Order
✓ Owner	
✓ Secondary Addressee Des	1 The documents now qualify for the Signature process
✓ Non-Residence Sale Decl	
 Proposed Insured #1 	Please click the "Lock Documents and Proceed to the Signature Process" button
✓ Payment Information	Prease click the Lock Documents and Proceed to the signature Process Dutton
🗸 Validate and Lock Data	Lock Documents and Proceed to the Signature Process
	✓ Back



- Validate and Lock Data
 - The e-App must be locked in order to sign the application
 - Notice the green check marks have now turned to locks. This means the information is locked down and cannot be changed
 - If you need to change any information once it has been locked, click Unlock Documents and Cancel Signature Process and the locks will turn back to green check marks. Go to the screen where the change needs to be made, make the change then proceed to "Validate and Lock" screen

Pre-Qualifying	Validate and Lock Date
Pre-Qualifying, Cont	Validate and Lock Data
License and Appointment	S The documents have been locked!
Owner	
Secondary Addressee Des	The documents have been locked to protect client data from digital alteration during the Signature process.
Non-Residence Sale Decl	Please be aware that unlocking the documents will cancel all previously collected electronic signatures and will require you to complete the Signature process again.
Proposed Insured #1	
Payment Information	If you need to edit the documents, click the "Unlock Documents and Cancel Signature Process" button. Once your edits are complete and the documents are in Good Order, lock the documents and proceed to the Signature process by selecting "Validat
 Validate and Lock Data 	and Lock Data* located on the left-hand navigation tree. This case will remain on iPipeline for 120 days from the time you started this case. After this, the case will be archived and the documents will no longer be available for update or submission.
	Unlock Documents and Cancel Signature Process
	C Back Next >

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Thank you

Any questions?

- Our Foresters Financial Sales Support team is only a call away, 866-466-7166, option 1
- If you're looking for a deeper dive on a particular module please let us know at <u>USLearning@foresters.com</u>



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