



Do you spend money on leads? WE'LL DOUBLE IT!

The Double Down Co-op Lead Program is designed to help agents double their monthly budget for leads and marketing. Agents must be contracted directly to Western Marketing at the agent level to qualify. Agencies and agents contracted above street level do not qualify.

For qualifying issued and paid Medicare Supplement applications within a calendar month, Western Marketing will match your costs for leads and marketing up to the following amounts:

	# of Apps in a calendar month	We'll match your marketing costs up to:
Level 1	5 to 9	\$112.50
Level 2	10 to 19	\$225.00
Level 3	20 to 29	\$450.00
Level 4	30+	\$900.00

Guaranteed issue business and High-deductible Plan F do not qualify for this program. Requests for co-op funds must be submitted to Western Marketing no later than the last day of the month following the month of qualification. This offer cannot be used in conjunction with any other Western Marketing co-op program.

See page 2 for complete rules and requirements.

Western Marketing reserves the right to terminate this program at any time.

Rules

Marketing expenses must be for generating new Medicare business. Items not eligible for reimbursement include, but are not limited to: licensing fees, meals, clothing, telephone, office expenses, office supplies or personal items.

You are responsible for completing the attached form to document qualifying policies and request program participation. Return the request form and other requirements by fax or email to Western Marketing at 888-507-1861 or NewBusiness@wmacorp.com.

Western Marketing reserves the right to cancel this program at any time.

Requirements

1. Verify your production via screen shots showing the number of Medicare Supplement apps issued in the previous calendar month through Western Marketing. Remember, guaranteed issue apps and high-deductible Plan F, as well as plan changes are not eligible.
2. Place your lead order with the vendor and print your paid invoice. You can find our preferred lead vendors at www.wmacorp.com/Leads.
3. Fax or email your documentation of production, your paid invoice from your lead order, and the completed Reimbursement Request Form to Western Marketing at 888-507-1861 or NewBusiness@wmacorp.com

For 5-9 Medicare Supplement apps issued in the previous month you will be reimbursed up to \$112.50 or 50% of your lead order, whichever is lower. For 10-20 apps you will be reimbursed up to \$225 or 50% of your lead order, whichever is lower. For 21-30 apps you will be reimbursed up to \$450 or 50% of your lead order, whichever is lower. For 30+ apps you will be reimbursed up to \$900 or 50% of your lead order, whichever is lower. The average cost for a 1,000 piece lead mailer from our preferred vendors is around \$450.

Preferred Lead Vendors

Most of our preferred vendors have similar ordering processes and pricing, but they differ in the product lines they support and the style of their mail pieces. You will have to decide which vendor to use. When placing your order, be sure to mention you are an agent with Western Marketing to receive our discounted pricing.

You can view our preferred lead vendors here: www.wmacorp.com/Leads



Reimbursement Request Form

Agent Name: _____

Agent Phone: _____

Agent Email: _____

Agent Mailing Address: _____

Reimbursement Amount Requested: _____

Month Qualified: _____

Agent Signature

Date

By signing this form, you agree to the rules and requirements of the program and that all marketing activities must be conducted in compliance with federal and state laws. Typing your name above is equivalent to a handwritten signature.

Return this request form by fax or email to Western Marketing at 888-507-1861 or NewBusiness@wmacorp.com

Thank you for placing your business with Western Marketing!