



## TEETHKEEPERS COMMISSION SCHEDULE

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	New	Renewal
Select Plans	8%	8%
PPO Plans	6%	6%
Vision Plans	6%	6%
Discount Program	18%	18%

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These percentages apply to accounts that are fully serviced or solely referred by the agent.

Payment of these services is subject to the conditions as outlined in the attached Service Agreement.

**This schedule is subject to change from time to time with notice, but no such change shall affect compensation on contracts issued prior to the effective date of such change, except by mutual agreement.**

Accepted: \_\_\_\_\_  
Agent/Agency Representative

Date: \_\_\_\_\_