

MyEnrollerSM, our electronic quoting and application tool, is available via internet connection for desktops, laptops, cell phones, or tablets. While in the field, connect to the internet via Wi-Fi or a mobile hot spot. MyEnroller uses one app for three Final Expense products and utilizes advanced technology to speed up the underwriting process and accepts three signature options. All of which add up to better agent and client experiences.

1. Log in

a. If you haven't registered on GWIC's agent portal, visit <u>my.gwic.com</u> to create a username and password. Once you're logged in, click the "MyEnroller: Final Expense" button on the homepage.

2. Dashboard

- a. View details on Incomplete or Complete submissions or use the search feature to find a client's application.
- b. Begin the quote or enrollment process by adding key data.

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Applicant	State	Products	Date Started	Last Updated	Current Step	Edit	Delete		
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Dax Dennis	FL	FE	03/25/2022 2:32 PM	03/25/2022 3:03 PM	Agreement	Edit	Delete		77
G G	IA	FE	03/25/2022 2:27 PM	03/25/2022 2:29 PM	Payment	Edit	Delete		

Dashboard



Seared Information First Name Suffix (ex: /c) Final Expense Source Home Address Apt/Bidg/Unit City State Source Source	General Information	Medical Beneficiary	Replacement	Third Party	Agreement	Signature	Agent Only	Email App	Bill Day	Payment	Review	Submit	MyEnroller 🚔	
First Name Middle Initial * Lest Name Suffic (ec. /r.) Final Expense Plan: Great Assurance Fi	General Information													
Home Address Apt/Bldg/Unit City * State * Zip Code Zip Code Zip Code Apt/Bldg/Unit City * State * Zip Code Apt/Bldg/Unit City * State * Zip Code Apt/Bldg/Unit City * State * Zip Code Apt/Bldg/Unit Plan: Great Assurance Final Expense IA S0009 Plan: Great Assurance Final Expense Accidental Death Benefit Ridder: Sal Apt/Bldg/Unit Source Apt/Bldg/Unit Plan: Great Assurance Final Expense IA S0009 Plan: Great Assurance Final Expense Accidental Death Benefit Ridder: Sal Apt/Bldg/Unit IA S0009 Premium Total: S45.49 I have read the following statement to the application under the authority of a Power of Attorney. Cuardinathip. Conservatorship7 I have read the following statement to the application will be complete, true and correctly recorded to the best of your knowledge.	* First Name	Mide	lle Initial			* Last Name			Suffix (e	90 Jf.)		~	Final Expense	
Phone Mobile Applicant SSN Email Address Method: Automatic Bank Withdram Face Amount: 5000 Phone Is Owner different than the Primary Insured? Premium Total: \$45,49 Premium Total: \$45,49 Will someone be signing the application under the authority of a Power of Attorney. Cuardianship. Conservatorship? Save and return I have read the following statement to the application will be complete, true and correctly recerded to the best of your knowledge. Save and return	• Home Address	Home Address Apt/Eldg/Unit			+ City			* State	* State * Zip Code IA 50009			Plan: Great Assurance Final Expense Child Grandchild Rider: True Accidental Death Benefit Rider: False Frequency: Monthly		
Is Owner different than the Primary Insured? Image: Save and return Will someone be signing the application under the authority of a Power of Attorney. Guardianship, Conservatorship? Save and return I have read the following statement to the application will be complete, true and correctly recorded to the best of your knowledge. Save and return	Phone	Mobile	Mobile Applicant SSN			Email Address						Method: Automatic Bank Withdrawa Face Amount: 5000		
Save and return Save and return * The information furnished on this application will be complete, true and correctly recorded to the best of your knowledge.	Is Owner different than the P	imary Insured?											Premium total: 343/45	
I have read the following statement to the applicant and received agreement: • The information furnished on this application will be complete, true and correctly recorded to the best of your knowledge.	 Will someone be signing the 	application under the authorit	y of a Power of Atto	mey. Guardiansh	iip. Conservators	hip?							Save and return	
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	Return to Quote Net	dt (

Navigation

3. Navigating the site

- a. "Jump-to-navigation" lets you toggle between screens you've visited. Click on the three horizontal marks in the top left corner to select past screens. You're not allowed to jump forward.
- b. "Save and return" allows you to save the quote or application on the last page that you completed and takes you back to the Dashboard.
- c. "Return to quote" allows you to return directly to the quote page to change options.
- d. The "Progress bar" is located at the top of the screen. Click on any screen that has already been visited to make changes.

4. Quote screen

- a. Select the state where you, as the agent, are appointed and will be completing the enrollment.
- b. Insert the insured's ZIP code, gender, and date of birth and click on "Start new" to view the quote screen.
- c. To make a correction or create multiple quotes on one screen, update the details and click "Refresh".

d. To begin enrollment, check the box to the left of "Final Expense", click the "Add plan" button at the bottom of the product section, and select the "Continue application" button in the summary on the right side of the screen.

5. Enrollment screens

- a. Required fields are noted with red asterisks.
- b. If any fields contain errors or missing information, they will appear with red text describing the issue or have a red box around them. You will not be allowed to move to the next screen until the errors are fixed or missing fields are completed.
- c. Screens will contain information based on each state's filed forms and previously answered questions. Questions or text may expand on screens based on responses.
- d. As you select and save features, you'll see them added to the summary box on the right side of the screen.



6. Signatures

- a. Users have three signature options.
 - i. Electronic, which may be used when the applicant is present or not present.
 - ii. Voice authorization through a conference call to an 800 number.

b. If the owner is different than the insured, a signature for the owner must also be collected. The text on the screen will indicate when to collect each signature.

7. Additional functionality

a. Split commissions

i. To split a commission with another agent, enter the agent's name and GWIC Final Expense writing number, and the commission percentages that equal 100%.

b. Email copy of application

i. Forms can be sent to the applicant's email address for review and to save in their files. The copy will be a PDF and require a password.

8. Underwriting response

a. The application is moved to the underwriting system for processing. You will see a decision on the app based on the client's information: it's accepted, an alternative plan is suggested, or it requires further review.

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Thank you for your business. Based on your clie see a side-by-side comparison below of the orig	nt's health history, we are able to offer the Guaranteed Assurance plan. You will inal plan you applied for next to the updated plan.
Case #132-0002-004657	
Initial options quoted and applied for: Plan Name: Great Assurance Final Expense Rate Class: Non-Smoker Face Amount: \$4,000.00 Total Premium: \$27.27	Eligible option: Plan Name: Guaranteed Assurance Rate Class: Smoker Face Amount: \$4,000.00 Total Premium: \$45.58
Please press the "Accept offer" or "Decline offer" will receive an email within 1 business day to ac application will be withdrawn. If the offer is accepted, a policy number will be p	" button to indicate your client's decision. If no response is provided, the agent cept or decline the offer. If no response is received within 5 business days, the provided momentarily.
	Accept offer Decline offer
derwriting response: Alternative plan s	suggested

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