**XXXXXX (Insert Company Name). • Privacy Statement and Notice**

Title V of the Gramm-Leach-Bliley Act and Wisconsin state law requires all financial and insurance institutions to have processes in place to protect the confidentiality of your personal information. In accordance with these laws, XXXXX will provide customers with a copy of our Privacy Statement annually.

XXXXXX is committed to providing our customers with the highest level of service and support. We take safeguarding our customer’s personal information very seriously. Your privacy will always be a priority at XXXXXX.

**Source of Information:**

We collect nonpublic personal information about you from sources such as:

• Applications or forms that you complete;

• Applications or forms that you authorize others to complete for you (e.g. , physicians who may provide medical information for health, disability or life

 insurance);

• Consumer or reporting agencies, medical and health care providers, motor vehicle administration offices, or governmental agencies (for example,

 medical record bureaus who report information for life insurance);

• Information about your transactions with us, our affiliates, (and others?); and

• Information we collect when you visit our website.

**Type of Information:**

*We use the nonpublic personal information obtained for business purposes only, including but not limited to evaluating your application for insurance, processing your claims, complying with your service requests, and processing your transactions. We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. This may include:*

• Personal information, including name, address, telephone number, social security number, date of birth, etc.

• Financial information covered by the Fair Credit Reporting Act, such as types of insurance carried, premiums paid, credit history, income, and assets

 (e.g., for financial planning purposes)

• Health information, including information about your medical history, health, and general insurance underwriting risk factors (e.g., for life and disability

 insurance)

• Driving information, including traffic tickets, accidents, and claims

**Use of Information:**

*As allowed by law, we may provide information to the following:*

 • Insurance companies that provide the product you have applied for or purchased, for the purpose of underwriting,

 processing claims, and the overall servicing of your policy

• Administrators or other third party entities that may provide service for the product you have applied for or purchased (e.g., an administrator who

 maintains your IRA account)

• Anyone to whom you have authorized us to disclose the information

**Security of Information:**

• We do not provide nonpublic information to any individual or entity other than those listed above

• We do not sell your information to any entity

• We restrict access to nonpublic personal information about you to those employees who need to know the

 information so that they may provide the service and support necessary to administer your account

• We maintain physical and procedural safeguards that comply with regulatory standards to protect your

 nonpublic personal information

• We encrypt all outgoing e-mail containing personal, identifiable information.

• We require all employees to adhere XXXXXX. Confidentiality and Privacy policies

**Reservation of the Right to Disclose Information in Unforeseen Circumstances:**

In the connection with the potential sale or transfer of its interests, XXXXXX reserves the right to sell or transfer your information (including but not limited to your address, name , age, sex, zip code, state and country of residency and other information that you provide through other communications) to a third-party entity that (1) concentrates its business in a similar practice or service; (2) agrees to be XXXXX successor in interests with regard to the maintenance and protection of the information collected; and (3) agrees to the obligations of this privacy statement.

**Opt Out of or Stop Certain Disclosures about You:**

XXXXXXX does not make disclosures of your nonpublic personal information to non-affiliated third parties. As such, there is no need for you to opt out of or stop certain disclosures about you. Further, the opt out does not apply to disclosures that are legally permitted or to disclosures we make to companies that perform services on our behalf or to other insurance companies or financial institutions that have joint marketing agreements with us.

This privacy statement applies to all current and former customers. If you have any questions about our privacy policy, please contact us. We appreciate our relationship with you and thank you for your business.