

Holding Tank Invoice - AEGON USA / STONEBRIDGE LIFE INSURANCE COMPANY

CompanyID	Trans #	State	Tran Type/ Processed By	Agent Last Name	Agent First Name	Fee
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190012 47301200	CA	TERMINATION diane	SEPTEMBER	MZWANDILE	\$24.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190011 47301200	CA	TERMINATION diane	SEPTEMBER	MZWANDILE	\$24.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190036 40855000	CA	TERMINATION diane	RAMOS	CARMEN	\$24.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190037 46000713	CA	TERMINATION diane	RAMOS	CARMEN	\$24.00
Total for state of CA						\$96.00
AEGON TRANSAMERICA LIFE INSURANCE COMPANY	200812190072 47301200	NH	APPOINTMENT DOLORES	Seewald	Kenneth	\$25.00
AEGON TRANSAMERICA LIFE INSURANCE COMPANY	200812190076 47301200	NH	APPOINTMENT DOLORES	Roth	Donald	\$25.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190071 47301200	NH	APPOINTMENT DOLORES	Seewald	Kenneth	\$25.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190075 47301200	NH	APPOINTMENT DOLORES	Roth	Donald	\$25.00
Total for state of NH						\$100.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190085 47301200	NJ	APPOINTMENT DOLORES	Waterman	Brandon	\$25.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190083 47301200	NJ	APPOINTMENT DOLORES	Waterman	Brandon	\$25.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190059 47301200	NJ	APPOINTMENT DOLORES	Williams	Mark	\$25.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190060 47301200	NJ	APPOINTMENT DOLORES	Williams	Mark	\$25.00
AEGON	200812190041 40855000	NJ	TERMINATION diane	RAMOS	CARMEN	\$25.00

MONUMENTAL LIFE INSURANCE COMPANY						
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190043 46000713	NJ	TERMINATION diane	RAMOS	CARMEN	\$25.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190021 47301200	NJ	TERMINATION diane	SEPTEMBER	MZWANDILE	\$25.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190022 47301200	NJ	TERMINATION diane	SEPTEMBER	MZWANDILE	\$25.00
Total for state of NJ						\$200.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190070 47301200	TX	APPOINTMENT DOLORES	Moody	Deborah	\$10.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190061 47301200	TX	APPOINTMENT DOLORES	Williams	Mark	\$10.00
AEGON STONEBRIDGE LIFE INSURANCE COMPANY	200812190062 47301200	TX	APPOINTMENT DOLORES	Williams	Mark	\$10.00
AEGON MONUMENTAL LIFE INSURANCE COMPANY	200812190069 47301200	TX	APPOINTMENT DOLORES	Moody	Deborah	\$10.00
Total for state of TX						\$40.00
Transaction Grand Total:						\$436.00
Pre-Pay Service Charge (3% of Total):						\$13.08
Net Total Amount Due:						\$449.08

The above listed transactions for Holding Tank states, as indicated, have been paid on your behalf.

INVOICE NUMBER: **200806904**

Systeme's FEIN Number: 20-0811771

DUE UPON RECEIPT - These funds have already been paid on your behalf. Please help us by responding promptly to this invoice.

RETAIN THIS INVOICE FOR YOUR RECORDS. PLEASE ONLY RETURN THE INVOICE MAILER ON THE NEXT PAGE.

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT
 Make check payable to **SYSTEME SOFTWARE, INC.**, and mail to:

Systeme Software, Inc
ATTN: Billing Department
PO Box 586
Boyertown, PA 19512

Amount Enclosed: _____

INVOICE NUMBER: **200806904** INVOICE DATE: **12/22/2008**
CLIENT: **AEGON USA / STONEBRIDGE LIFE INSURANCE COMPANY** (AEGON)
TOTAL DUE: **\$449.08**

Amount Enclosed: \$ _____

Payment Method: Check Visa MasterCard
 American Express Discover

Card #: _____ Exp Date: ____/____/____

Name on Card: _____

Billing Zip Code: _____ Required for credit card validation

Signature: _____ (required)

One-Time Payment Authorization

I hereby authorize Systeme Software Inc to charge the balance of this invoice only to the credit card number indicated.

Auto-Payment Authorization

I hereby authorize Systeme Software Inc to charge the balance of my account on a monthly basis to the credit card number indicated.

Email Notification Request

I would like to receive an email notification when my credit card has been charged.

FOR OFFICE USE ONLY: Date Received: ____/____/____ Inv Date: 12/22/2008

Processed By: _____

Check Number: _____

Thank you for your business and for your prompt attention to this matter.