Agent: Granata Enterprises 1137 Acorn Drive Greensburg PA 15601

Granata Enterprises

sam.granata@iautomateit.com Commission Statement January, 2003

Policy No.	Name	From To	o Company	Product	Plan Name	Code Mod	de I	Mos	Group	PCPM*	Adj. Desc.	Premium	POP	Comm.
Writing Age	ent													
049	Granata Enterprises	12/02 12/0	02 Highmark	HEALTH	FA	UN	1		2	\$14.44		\$496.56	5.82%	\$28.88
192	Granata Enterprises	02/03 02/0	03 Highmark	HEALTH	DIRP-PPO	RN	1	0		\$45.44		\$152.95	29.71%	\$45.44
192	Granata Enterprises	01/03 01/0	03 Highmark	HEALTH	KEYS-HMO2	RN	1	34		\$10.27		\$860.50	1.19%	\$10.27
Writing Age	ent Subtotal											\$1,510.01		\$84.59
Overriding	Agent													
167	Granata Enterprises	01/03 01/0	03 Highmark	HEALTH	COMP-DIRP2	RN	1	5		\$7.21		\$171.30	4.21%	\$7.21
197	Granata Enterprises	01/03 01/0	03 Highmark	HEALTH	COMP-DIRP2	RN	1	5		\$7.21		\$151.65	4.75%	\$7.21
Overriding Agent Subtotal												\$322.95		\$14.42
Totals:									2.0*			\$1,832.96		\$99.01
												F:1 T		\$99 N1

Final Total:

\$99.01

Product	01/2003	12/2002	11/2002	10/2002	09/2002	08/2002	Product	Year To Date
HEALTH	\$99.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	HEALTH	\$99.01
LIFE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	LIFE	\$0.00
	\$99.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$99.01

^{*}PCPM=Per Contact Per Month; Pop=Percent of Premium; Total Group Count Excludes Duplicates, Dental, Vision, & Drug