



AFFILIATE PARTNER AGREEMENT

Identity Theft Defense Programs Personal Internet Identity Coverage (PIIC)

This memorandum discusses the provisions of the Affiliate Partner Agreement (the "**Agreement**") between The Cyberian Group, Inc., a Delaware corporation ("**Cyberian**") dba Cyberian Insurance Services and dba Cover My ID!, and your firm ("**You/Your Agency**").

AGREEMENT OVERVIEW

Thank you for choosing our 'Cover My' ID! Identity Theft Defense Programs programs for your clients. By offering our programs including Personal Internet Identity Coverage (PIIC) underwritten by member companies of American International Group, Inc. (an A. M. Best A+ Superior rated insurance company), you have selected one of the most competitive and customer friendly Identity Theft Defense Programs on the market. We market the PIIC insurance coverage under the brand name 'Cover My ID! 'GOLD' and 'Gold Restoration' Identity Theft Defense Programs". We trust that Our partnership will be a long and profitable one.

The purpose of this document is to explain the Agreement between Your Company and Ours. For the purposes of this Agreement, The Cyberian Group Inc., Cyberian Insurance Services, Cover My ID!, and American International Group, Inc. (AIG) are also known as We, Us, Our.

OUR PROMISE

1. As the Licensed Insurance Broker, we (The Cyberian Group Inc. dba Cyberian Insurance Services) will supply insurance certificates (Description of Services & Benefits), the Enrollment package and claim kits (Victim Assistance Kit) for Your enrollees as needed.
2. Courteous and knowledgeable Cyberian Insurance Services administrators will be available by telephone to answer Your sales related questions. This availability will be during normal business hours, Monday through Friday by calling 1-866-609-3604 x106.
3. We agree to protect the confidentiality of Your business property and client information.
4. We will provide and maintain a link to a unique Affiliate Partner Sales page for online sales of the 'Cover My ID!' web site at www.CoverMyID.com /[your agency name] for logging and tracking sales.
5. We will also accept sign-ups provided to Us in spreadsheet format (Excel), and We will bill You/Your Agency for these sales. Note that coverage does not begin until payment in full is made.
6. We will provide you with online access to real time sales reports of Your sales made on your unique Affiliate Partner Purchase web page.
7. Sales commission of 15% per Program sold will be paid to You/Your Agency, with a \$1.00 override when sales reach 10,000 units.
8. We will provide you with a Monthly Sales Statement and commission payment by the 15th day of the following month of sales, or by fiscal quarter if sales volume is less than 50 units per month.
9. We agree to hold You harmless for Our errors and omissions.

10. We will provide You/Your Agency with the materials and knowledge to market and report Membership Program sales.
11. American International Group, Inc. will handle all Customer Service, Assistance & Claims related questions promptly.
12. Premium refunds are granted if requested in writing within 10 business days of the purchase and no claim has been filed.
13. We will review Your account with You, at least once per year, but as often as You wish. We want to understand the things that make You successful and those things that cause problems.

YOUR PROMISE

1. You will be responsible for the sales and marketing expenses related to Your affiliate sales of the 'Cover My ID!' Identity Theft Defense Programs. All advertising materials of any kind must be pre-approved. This Program may be sold only to U.S. residents.
2. You agree to pay all valid invoices within the terms of the invoice (not to exceed 30 days). Please Note: customers are not legally covered until payment is made on their Program policy.
3. In the event of a claim or problem with a sale, You may be asked to provide documentation or other information to help Us verify coverage and expedite the claim settlement. You agree to provide Us with a contact person, phone number and address for Us to communicate claim, enrollment, and other information requests.
4. You agree to protect the confidentiality of Your the 'Cover My ID!' Identity Theft Defense Programs wholesale rates.
5. You agree to hold Us harmless for Your errors and omissions.

OTHER AGREEMENT DETAILS

1. The Program Claims Administrator is:
American International Specialty Lines Insurance Company
2. To file a claim, contact 1-866-609-3604 x106 or Affiliates@CoverMyID.com
3. American International Specialty Lines Insurance Company underwrites the program and is a member company of American International Group, Inc. (AIG), one of the country's leading specialty underwriting organizations.
4. The Cyberian Group Inc, dba Cyberian Insurance Services is an appointed Insurance Broker for American International Group, Inc., and is a valid Master Policy Holder of the PIIC coverage policy (#916264).
5. Cyberian Insurance Services hereby appoints the below named company in a non-exclusive arrangement to market the 'Cover My ID! Identity Theft Defense Programs. The Programs are available now for marketing.
6. We agree not to solicit any of Your customers for any other membership service or benefit without Your direct written approval.
7. You agree You are an independent contractor and as such shall not be considered an employee of Ours.

8. Either party may terminate this Agreement at any time upon 30 days advanced written notice to the other. We may also terminate this Agreement immediately upon written notice for violation of law or non-compliance with this Agreement by You.
9. This Agreement and the authority given may not be assigned to another person or entity without Our expressed, written permission.

WHAT HAPPENS NOW?

1. By submitting the online application form to become an Affiliate Partner, You verify that You have read and understood this Agreement, accept the terms and price structure and wish to enter into this Affiliate Partner Agreement with Us.
2. We will contact You regarding any special printing needs, logos, etc.
3. We will train someone designated by You about the Program.
4. If You have any questions about these Services & Benefits please contact Us at 1-866-609-3604 x.106 where the Account Manager will either answer the question(s) or direct the question to the appropriate person for a response. We will follow up with You to make sure Your questions are answered promptly.
5. Should one of Your client's have a claim or a benefit question, please direct them to call Our administrator's service number(s) below:

Claims Contact Number: **1-866-609-3604 x102**

Fax: **866-609-3604**

Email: **CustomerService@CoverMyID.com**

Next Steps:

If you'd like to become an Affiliate Partner and have not already completed the online application, please apply online at www.CoverMyID.com/agencies.asp, email us at Affiliates@CoverMyID.com or call our Affiliate Programs Dept. at 866-609-3604 x106

Thank you for your interest!