BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement ("Agreement") is entered into on July 1, 2015 (the "Effective Date"), by and between Canton Town and Board of Education on behalf of the Group Health and Welfare Plans of Canton Town and Board of Education ("Covered Entity") and Gallagher Benefit Services, Inc. ("Business Associate").

RECITALS:

WHEREAS, Covered Entity and Business Associate mutually desire to outline their individual responsibilities with respect to the use and/or disclosure of Protected Health Information ("PHI") as mandated by the Privacy Rule promulgated under the Administrative Simplifications subtitle of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") including all pertinent regulations issued by the U.S. Department of Health and Human Services as outlined in 45 C.F.R. Parts 160, 162 and 164 ("HIPAA Privacy Rules and/or Security Standards"); and

WHEREAS, Covered Entity and Business Associate understand and agree that the HIPAA Privacy Rules and Security Standards requires the Covered Entity and Business Associate enter into a Business Associate Agreement which shall govern the use and/or disclosure of PHI and the security of PHI and ePHI.

NOW, THEREFORE, the parties hereto agree as follows:

1. Definitions. When used in this Agreement and capitalized, the following terms have the following meanings:

   (a) "Breach" shall have the same meaning as the term "Breach" in 45 C.F.R. §164.402.

   (b) "Electronic Protected Health Information" or "ePHI" shall mean Protected Health Information transmitted by electronic media or maintained in electronic media.

   (c) "Individual" shall have the same meaning as the term "Individual" in 45 C.F.R. §160.103 and shall include a person who qualifies as a personal representative in accordance with 45 C.F.R. §164.502(g).

   (d) "Privacy Rule" shall mean the Standards for Privacy of Individual Identifiable Health Information as set forth at 45 C.F.R. Parts 160 and 164 Subparts A and E.

   (e) "Protected Health Information" or "PHI" shall have the same meaning as the term "protected health information" in 45 C.F.R. § 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.
(f) "Required by Law" shall have the same meaning as the term "required by law" in 45 C.F.R. § 164.103.

(g) "Secretary" shall mean the Secretary of the Department of Health and Human Services or his or her designee.

(h) “Security Incident” shall mean any attempted or successful unauthorized access, use, disclosure, modification or destruction of information or systems operations in an electronic information system.

(i) “Security Rule” shall mean the Standards for Security of PHI, including ePHI, as set forth at 45 C.F.R. Parts 160 and 164 Subparts A and C.

(j) “Unsecured Protected Health Information” shall mean protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized persons through the use of a technology or methodology specified by the Secretary.

Terms used but not defined in this Agreement shall have the same meaning as those terms in the HIPAA regulations.

2. **Obligations and Activities of Business Associate Regarding PHI**

   (a) Business Associate agrees to not use or further disclose PHI other than as permitted or required by this Agreement or as Required by Law.

   (b) Business Associate agrees to use appropriate safeguards to prevent use or disclosure of the PHI other than as provided for by this Agreement.

   (c) Business Associate agrees to ensure that any agents, including sub-contractors (excluding entities that are merely conduits), to whom it provides PHI agree to the same restrictions and conditions that apply to Business Associate with respect to such information.

   (d) Business Associate agrees to provide access, at the request of Covered Entity, and in a reasonable time and manner designated by Covered Entity, to PHI in a Designated Record Set that is not also in Covered Entity's possession, to Covered Entity in order for Covered Entity to meet the requirements under 45 C.F.R. § 164.524.

   (e) Business Associate agrees to make any amendment to PHI in a Designated Record Set that the Covered Entity directs or agrees to pursuant to 45 C.F.R. § 164.526 in a reasonable time and manner designated by Covered Entity.

   (f) Business Associate agrees to make internal practices books and records relating to the use and disclosure of PHI available to the Secretary, in a reasonable time and manner as designated by the Covered Entity or Secretary, for purposes of the Secretary determining Covered Entity's compliance with the Privacy Rule. Business Associate shall immediately notify Covered Entity upon receipt or notice of any request
by the Secretary to conduct an investigation with respect to PHI received from the Covered Entity.

(g) Business Associate agrees to document any disclosures of PHI that are not excepted under 45 C.F.R. § 164.528(a)(1) as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.

(h) Business Associate agrees to provide to Covered Entity or an Individual, in a time and manner designated by Covered Entity, information collected in accordance with paragraph (g) above, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.

(i) Business Associate agrees to use or disclose PHI pursuant to the request of Covered Entity; provided, however, that Covered Entity shall not request Business Associate to use or disclose PHI in any manner that would not be permissible under the Privacy Rule if done by Covered Entity.

3. **Permitted Uses and Disclosures of PHI by Business Associate.**

   (a) Business Associate may use or disclose PHI to perform functions, activities or services for, or on behalf of, Covered Entity provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity.

   (b) Business Associate may use PHI for the proper management and administration of Business Associate and to carry out the legal responsibilities of Business Associate.

   (c) Business Associate may disclose PHI for the proper management and administration of Business Associate and to carry out the legal responsibilities of Business Associate if:

      (i) such disclosure is Required by Law, or

      (ii) Business Associate obtains reasonable assurances from the person to whom the information is disclosed that such information will remain confidential and used or further disclosed only as Required by Law or for the purposes for which it was disclosed to the person, and the person agrees to notify Business Associate of any instances of which it is aware that the confidentiality of the information has been breached.

   (d) Business Associate shall limit the PHI to the extent practicable, to the limited data set or if needed by the Business Associate, to the minimum necessary to accomplish the intended purpose of such use, disclosure or request subject to exceptions set forth in the Privacy Rule.
(c) Business Associate may use PHI to provide Data Aggregation services to Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B).

4. **Obligations of Covered Entity Regarding PHI.**

(a) Covered Entity shall provide Business Associate with the notice of privacy practices that Covered Entity produces in accordance with 45 C.F.R. § 164.520, as well as any changes to such notice.

(b) Covered Entity shall provide Business Associate with any changes in, or revocation of, authorization by an Individual to use or disclose PHI, if such changes affect Business Associate's permitted or required uses and disclosures.

(c) Covered Entity shall notify Business Associate of any restriction to the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 C.F.R. § 164.522, if such restrictions affect Business Associate's permitted or required uses and disclosures.

(d) Covered Entity shall require all of its employees, agents and representatives to be appropriately informed of its legal obligations pursuant to this Agreement and the Privacy Rule and Security Standards required by HIPAA and will reasonably cooperate with Business Associate in the performance of the mutual obligations under this Agreement.

5. **Security of Protected Health Information.**

(a) Business Associate has implemented policies and procedures to ensure that its receipt, maintenance, or transmission of all PHI, either electronic or otherwise, on behalf of Covered Entity complies with the applicable administrative, physical, and technical safeguards required protecting the confidentiality, availability and integrity of PHI as required by the HIPAA Privacy Rules and Security Standards.

(b) Business Associate agrees that it will ensure that agents or subcontractors agree to implement the applicable administrative, physical, and technical safeguards required to protect the confidentiality, availability and integrity of PHI as required by HIPAA Privacy Rules and Security Standards.

(c) Business Associate agrees to report to Covered Entity any Security Incident (as defined 45 C.F.R. Part 164.304) of which it becomes aware. Business Associate agrees to report the Security Incident to the Covered Entity as soon as reasonably practicable, but not later than 10 business days from the date the Business Associate becomes aware of the incident.

(d) Business Associate agrees to establish procedures to mitigate, to the extent possible, any harmful effect that is known to Business Associate of a use or disclosure of PHI by Business Associate in violation of this Agreement.
(e) Business Associate agrees to immediately notify Covered Entity upon discovery of any Breach of Unsecured Protected Health Information (as defined in 45 C.F.R. §§ 164.402 and 164.410) and provide to Covered Entity, to the extent available to Business Associate, all information required to permit Covered Entity to comply with the requirements of 45 C.F.R. Part 164 Subpart D.

(f) Covered Entity agrees and understands that the Covered Entity is independently responsible for the security of all PHI in its possession (electronic or otherwise), including all PHI that it receives from outside sources including the Business Associate.

6. **Term and Termination.**

(a) **Term.** This Agreement shall be effective as of the Effective Date and shall remain in effect until the Business Associate relationship with the Covered Entity is terminated and all PHI is returned, destroyed or is otherwise protected as set forth in Section 6(d).

(b) **Termination for Cause by Covered Entity.** Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall provide an opportunity for Business Associate to cure the breach. If Business Associate does not cure the breach within 30 days from the date that Covered Entity provides notice of such breach to Business Associate, Covered Entity shall have the right to immediately terminate this Agreement and the underlying services agreement between Covered Entity and Business Associate.

(c) **Termination by Business Associate.** This Agreement may be terminated by Business Associate upon 30 days prior written notice to Covered Entity in the event that Business Associate, acting in good faith, believes that the requirements of any law, legislation, consent decree, judicial action, governmental regulation or agency opinion, enacted, issued, or otherwise effective after the date of this Agreement and applicable to PHI or to this Agreement, cannot be met by Business Associate in a commercially reasonable manner and without significant additional expense.

(d) **Effect of Termination.** Upon termination of this Agreement for any reason, at the request of Covered Entity, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. Business Associate shall not retain any copies of the PHI unless return or destruction is deemed infeasible. If the return or destruction of PHI is infeasible, Business Associate shall extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such PHI. For purposes of illustration only and not to limit the set of circumstances that could potentially make return or destruction infeasible, it would be infeasible for Business Associate to return or destroy certain PHI that is part of work product that must be
retained for document retention/archival purposes, as well as PHI that is stored as a result of backup e-mail systems that store e-mails for emergency backup purposes.

7. **Amendment.**

The parties may agree to amend this Agreement from time to time in any other respect that they deem appropriate. This Agreement shall not be amended except by written instrument executed by the parties.

8. **Indemnification.**

Business Associate shall indemnify and hold harmless Covered Entity from and against any and all costs, expenses, claims, demands, causes of action, damages, attorneys' fees and judgments that arise out of or that may be imposed upon, incurred by, or brought against Covered Entity to the extent directly resulting from a breach of this Agreement or any violation of the Privacy Rule or other applicable HIPAA regulations by Business Associate. The indemnification obligations provided for in this Section will commence on the effective date of this Agreement and will survive its termination.

Covered Entity shall indemnify and hold harmless Business Associate from and against any and all costs, expenses, claims, demands, causes of action, damages, attorneys' fees and judgments that arise out of or are imposed upon, incurred by, or brought against Business Associate to the extent directly resulting from a breach of this Agreement or any violation of the Privacy Rule or other applicable HIPAA regulations by Covered Entity. The indemnification obligations provided for in this Section will commence on the effective date of this Agreement and will survive its termination.

9. **Severability.**

The parties intend this Agreement to be enforced as written. However, (i) if any portion or provision of this Agreement is to any extent declared illegal or unenforceable by a duly authorized court having jurisdiction, then the remainder of this Agreement, or the application of such portion or provision in circumstances other than those as to which it is so declared illegal or unenforceable, will not be affected thereby, and each portion and provision of this Agreement will be valid and enforceable to the fullest extent permitted by law; and (ii) if any provision, or part thereof, is held to be unenforceable because of the duration of such provision, the Covered Entity and the Business Associate agree that the court making such determination will have the power to modify such provision, and such modified provision will then be enforceable to the fullest extent permitted by law.

10. **Notices.**

All notices, requests, consents and other communications hereunder will be in writing, will be addressed to the receiving party's address set forth below or to such other address as a party may designate by notice hereunder, and will be either (i) delivered by hand, (ii) made
facsimile transmission, (iii) sent by overnight courier, or (iv) sent by registered mail or certified 
mail, return receipt requested, postage prepaid.

If to the Covered Entity:

<table>
<thead>
<tr>
<th>Canton Town and Board of Ed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Skinner</td>
</tr>
<tr>
<td>Four Market Street</td>
</tr>
<tr>
<td>Collinsville, CT 06019</td>
</tr>
</tbody>
</table>

If to the Business Associate:

<table>
<thead>
<tr>
<th>Gallagher Benefit Services, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>William A. Lindberg</td>
</tr>
<tr>
<td>Area Senior Vice President</td>
</tr>
<tr>
<td>100 Northfield Drive, 3rd Fl</td>
</tr>
<tr>
<td>Windsor, CT 06095</td>
</tr>
</tbody>
</table>

11. **Regulatory References.**

A reference in this Agreement to a section in the Privacy Rule means the referenced 
section or its successor, and for which compliance is required.

12. **Headings and Captions.**

The headings and captions of the various subdivisions of the Agreement are for 
convenience of reference only and will in no way modify or affect the meaning or construction 
of any of the terms or provisions hereof.

13. **Entire Agreement.**

This Agreement sets forth the entire understanding of the parties with respect to the 
subject matter set forth herein and supersedes all prior agreements, arrangements and 
communications, whether oral or written, pertaining to the subject matter hereof.

14. **Binding Effect.**

The provisions of this Agreement shall be binding upon and shall inure to the benefit of 
both Parties and their respective successors and assigns.

15. **No Waiver of Rights, Powers and Remedies.**

No failure or delay by a party hereto in exercising any right, power or remedy under this 
Agreement, and no course of dealing between the parties hereto, will operate as a waiver of any 
such right, power or remedy of the party. No single or partial exercise of any right, power or
remedy under this Agreement by a party hereto, nor any abandonment or discontinuance of steps to enforce any such right, power or remedy, will preclude such party from any other or further exercise thereof or the exercise of any other right, power or remedy hereunder. The election of any remedy by a party hereto will not constitute a waiver of the right of such party to pursue other available remedies. No notice to or demand on a party not expressly required under this Agreement will entitle the party receiving such notice or demand to any other or further notice or demand in similar or other circumstances or constitute a waiver of the right of the party giving such notice or demand to any other or further action in any circumstances without such notice or demand. The terms and provisions of this Agreement may be waived, or consent for the departure therefrom granted, only by written document executed by the party entitled to the benefits of such terms or provisions. No such waiver or consent will be deemed to be or will constitute a waiver or consent with respect to any other terms or provisions of this Agreement, whether or not similar. Each such waiver or consent will be effective only in the specific instance and for the purpose for which it was given, and will not constitute a continuing waiver or consent.

16. **Governing Law.**

This Agreement will be governed by and construed in accordance with the laws of the State of Illinois.

17. **Interpretation.**

It is the Parties' intent to comply strictly with all applicable laws, including without limitation, HIPAA, state statutes, or regulations (collectively, the "Regulatory Laws"), in connection with this Agreement. In the event there shall be a change in the Regulatory Laws, or in the reasoned interpretation of any of the Regulatory Laws or the adoption of new federal or state legislation, any of which are reasonably likely to materially and adversely affect the manner in which either Party may perform or be compensated under this Agreement or which shall make this Agreement unlawful, the Parties shall immediately enter into good faith negotiations regarding a new arrangement or basis for compensation pursuant to this Agreement that complies with the law, regulation or policy and that approximates as closely as possible the economic position of the Parties prior to the change. In addition, the Parties hereto have negotiated and prepared the terms of this Agreement in good faith with the intent that each and every one of the terms, covenants and conditions herein be binding upon and inure to the benefit of the respective Parties. To the extent this Agreement is in violation of applicable law, then the Parties agree to negotiate in good faith to amend this Agreement, to the extent possible consistent with its purposes, to conform to law.
IN WITNESS WHEREOF, the parties have executed this Business Associate Agreement as of the Effective Date.

BUSINESS ASSOCIATE:

GALLAGHER BENEFIT SERVICES, INC.

By: 

Name: William A. Lindberg
Title: Area Senior Vice President

CANTON TOWN AND BOARD OF EDUCATION:

By: 

Name: Robert H. Skinner
Title: Chief Administrative Officer
CLIENT COVERAGE ACKNOWLEDGMENT
AND COMPENSATION DISCLOSURE STATEMENT
FOR CANTON TOWN AND BOARD OF EDUCATION

This form documents that Gallagher Benefit Services, Inc. (Gallagher) will apply its professional
judgment to access those insurance companies it believes are best suited to insure the Client’s risks. The
final decision to choose any insurance company has been made by the Client in its sole and absolute
discretion. The Client understands and agrees that Gallagher does not take risk, and that Gallagher does not
guarantee the financial solvency or security of any insurance company. The Client is responsible for
immediate payment of premiums for all insurance placed by Gallagher on Client’s behalf. If any premium
amounts are not paid in full when due, the applicable insurance company for the Client’s risks may cancel
any applicable policies in accordance with the terms of such policies.

The following is the disclosure of fees and/or commissions to be paid to Gallagher as a result of its
Broker of Record relationship to Client’s Group Health and Welfare Plan and any relationships, or
agreements Gallagher has with any insurance companies selected by Client as noted above. Gallagher, as
Broker of Record, will receive the following initial and renewal sale commissions expressed as percentage
of gross premium payments, or fees as agreed upon by Client:

<table>
<thead>
<tr>
<th>Line of Coverage</th>
<th>Insurance Company</th>
<th>Effective Date</th>
<th>Commission1 / Supplemental Compensation2</th>
<th>Direct Fees3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>Anthem</td>
<td>07/01/2015</td>
<td>1% to 15% / 0% to 6%</td>
<td>N/A</td>
</tr>
<tr>
<td>STD</td>
<td>Anthem</td>
<td>07/01/2015</td>
<td>1% to 15% / 0% to 5%</td>
<td>N/A</td>
</tr>
<tr>
<td>LTD</td>
<td>Anthem</td>
<td>07/01/2015</td>
<td>1% to 15% / 0% to 5%</td>
<td>N/A</td>
</tr>
<tr>
<td>Medical</td>
<td>Anthem</td>
<td>07/01/2015</td>
<td>1.5% to 5% / $0 to $50 PCPY</td>
<td>N/A</td>
</tr>
<tr>
<td>Dental/</td>
<td>Anthem</td>
<td>07/01/2015</td>
<td>% / $0 to $30 PCPY</td>
<td>N/A</td>
</tr>
</tbody>
</table>

It should also be noted that:

- **Gallagher** is not an affiliate of the insurer whose contract is recommended. This means the insurer
  whose contract is recommended does not directly or indirectly have the power to exercise a controlling
  influence over the management or policies of **Gallagher**. **Gallagher**’s ability to recommend other
  insurance contracts is not limited by an agreement with the insurance company.

- **Gallagher** is effecting the transaction for the Plan(s) in the ordinary course of **Gallagher** business. The
  transaction set forth is at least as favorable to the Plan(s) as an arm’s length transaction with an unrelated
  party.

- **Gallagher** is not a trustee of the Plan(s) and is neither the Plan Administrator of the Plan(s), a fiduciary
  of the Plan(s), nor an employer which has employees in the Plan(s). **Gallagher** shall not exercise
discretionary authority or control with respect to plan management, the disposition of plan assets or
plan administration.

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1 Commissions include all commissions/fees paid to Gallagher that are attributable to a contract or policy between a plan and an insurance
company, or insurance service. This includes indirect fees that are paid to Gallagher paid by a third party, and includes, among other things, the
payment of “finders’ fees” or other fees to Gallagher for a transaction or service involving the plan.

2 Gallagher companies may receive supplemental compensation referred to in a variety of terms and definitions, such as contingent
commissions, additional commissions and supplemental commission.

3 Direct Fees include compensation to Gallagher paid or directly by the plan sponsor/Client.
• Gallagher’s liability to Client, or any party claiming by or through Client, or account of or relating to the provision of services to Client during the period of the relationship between Gallagher and Client shall not exceed $20 million in the aggregate. Without limiting the foregoing, Gallagher shall only be liable for actual damages incurred by Client, and shall not be liable for any indirect, consequential or punitive damages.

**For Employers and Plan Sponsors Subject to ERISA:** This Disclosure Statement is being given to the Client (1) to make sure Client knows about Gallagher’s and Gallagher affiliates’ income before purchasing the insurance product and (2) for plans subject to ERISA, to comply with the disclosure, acknowledgment and approval requirement of Prohibited Transaction Class Exemption No. 84-24, which protects both Client and Gallagher. Disclosure must be made to an independent plan fiduciary for the ERISA Plan(s), and Client acknowledges and confirms that this is a reasonable transaction in the best interest of participants in its ERISA Plan(s).

For more information on Gallagher’s compensation arrangements, please visit www.ajg.com/compensation. In the event a Client wishes to register a formal complaint regarding compensation Gallagher receives, please send an email to Compensation_Complaints@ajg.com or send a letter to: AVC Compliance Officer, c/o Internal Audit Department, Arthur J. Gallagher & Co., Two Pierce Place, Itasca, IL 60143.

Thank you for your business and continued confidence in the services Gallagher provides to you and your employees. We sincerely appreciate the opportunity to serve Canton Town and Board of Education. Please let us know if you have any questions regarding this information or would like more detail.

**GALLAGHER BENEFIT SERVICES, INC.**

By: [Signature]

Name: William A. Lindberg
Title: Area Senior Vice President
Date: July 20, 2015

Accepted by: CANTON TOWN AND BOARD OF EDUCATION

By: [Signature]

Name: Robert H. Skinner
Title: Chief Administrative Officer
Date: 1/15/16

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1 Which allows an exemption from a prohibited transaction under Section 408(a) of the Employee Retirement Income Security Act of 1974 (ERISA).

3 In making these disclosures, no position is taken, nor is one to be inferred, regarding the use of assets of a plan subject to ERISA to purchase such insurance.
July 20, 2015

Canton Town and Board of Education
Robert Skinner
Four Market Street
Collinsville, CT 06019

RE: Privacy Policy Disclosure

Dear Robert,

Gallagher Benefit Services, Inc. (Gallagher) treats your personal privacy with care and respect. Because we value our client relationships, we do not disclose our clients' nonpublic personal, financial or health information with third parties, except for the specific purposes listed in the enclosed Privacy Policy Summary or as otherwise permitted by law. Personal information is any information that can be used to identify, locate or contact you or your employees. Personal information does not include publicly available information or individually identifiable business contact information of employees such as name, title, business address, business telephone number or business email address.

Applicable law requires Gallagher to provide our clients with notice of our Privacy Policy, a summary of which is enclosed here (the full text of the Gallagher Privacy Policy can be retrieved at the following URL: http://www.aig.com/privacy-policy/). This policy does not apply to our efforts to market our products and services to you, so you may receive information from us regarding products that may suit your needs.

Gallagher has always been mindful of our clients' privacy. We maintain physical, electronic, and procedural safeguards that comply with federal and state regulations to guard your nonpublic personal, financial and health information and that of your employees.

Thank you for choosing Gallagher Benefit Services, Inc. We appreciate your business and value our relationship.

Enclosure
PRIVACY POLICY SUMMARY

This Privacy Policy Disclosure outlines and summarizes our information sharing practices to help you understand how we protect your privacy and that of your employees when we collect and use information about you and your employees, and the measures we take to safeguard that information.

Information We May Collect. We may collect the following nonpublic personal, financial or health information about you or your employees including:

- Information we receive from you and your employees on applications or questionnaires, such as occupation, current employer and social security number;
- Information about your transactions with us, our affiliates, or previous insurers; such as your policy coverage, claim information, premiums and payment history;
- Information we receive from consumer-reporting agencies such as Equifax that is obtained for the purpose of ascertaining credit histories. These reports are obtained as underwriting tools to determine bill paying habits and creditworthiness for certain individual, personal insurance products. These reports are not subject to race, gender or income;
- Information that allows us to communicate with you or your employees, such as name, user name, password, age, marital status, occupation, mailing address, telephone numbers, email address or other addresses that allow us to send a message;
- Information that assists us to conduct business with you or your employees, such as types of products or services that may be of interest, employee financial information or information on your company’s size, revenue, type, industry codes, demographics, locations, and financial information;
- Information about your transactions with us, our affiliates, or your previous providers;

Information We Disclose. We do not disclose any nonpublic personal, financial or health information about our clients, former clients or their employees to anyone, except for the purposes of placing your insurance coverage(s), fulfilling your requests for products or services and related activities, responding to your requests for a call or email, processing transactions you request, telling you about products or services we offer and as otherwise permitted by law.

Information Security. We restrict access to nonpublic personal, financial or health information about you and your employees to those employees and subcontractors who have a need to know that information to provide products or services to you or your employees. We maintain physical, electronic, and procedural safeguards that comply with federal and state regulations to guard your nonpublic personal, financial and health information and that of your employees.

6/3/2014