



**Initial Carrier Program Costs**

|                                                                                                        |                 |
|--------------------------------------------------------------------------------------------------------|-----------------|
| <b>Gestational Carrier Program Professional Fees</b>                                                   | <b>\$23,450</b> |
| First installment agency fee (non-refundable upon execution of Agreement for Services)                 | \$13,000*       |
| Second installment agency fee (non-refundable upon execution of Carrier Agreement)                     | \$8,500*        |
| Fee for unlimited Gestational Carrier rematches                                                        | \$3,200*        |
| Office expenses                                                                                        | \$750*          |
| Discount for signing up within three months of consultation                                            | (\$2,000)       |
| <b>Gestational Carrier Program Legal, Screening &amp; Support</b>                                      | <b>\$17,000</b> |
| Unlimited Social Worker screenings of Carrier and partner (including standard personality testing)     | \$2,000*        |
| Criminal history inquiry fees for carrier and intended parents                                         | \$300*          |
| Licensed Clinical Social Worker's fees for unlimited Carrier support                                   | \$3,500*        |
| Trust administration                                                                                   | \$2,000*        |
| Intended Parents' attorney's fees for carrier agreement (includes agreements for rematches)            | \$2,500*        |
| Carrier's independent attorney's fees (includes Carrier representation for rematches)                  | \$1,200*        |
| Coordination of local monitoring                                                                       | \$500*          |
| Travel for Carrier screening (including airfare, hotel, rental, childcare, lost wages, per diem, etc.) | \$5,000*        |
| <b>Amount Due at Signing (if within three months of consult)</b>                                       | <b>\$40,450</b> |
| - Additional Due at Signing (if after three months of consult)                                         | +\$2,000        |

\*Fixed, All Inclusive Fee Guaranteed by PRINCIPAL



**Carrier and Related Legal Costs**

|                                                                                                      |                 |
|------------------------------------------------------------------------------------------------------|-----------------|
| <b>Carrier Matching Costs</b>                                                                        | <b>\$52,000</b> |
| Carrier reimbursements                                                                               | \$30,000*       |
| Transfer payment                                                                                     | \$1,500*        |
| Maternity clothing                                                                                   | \$500±          |
| Estimated monthly expenses (including, mileage, childcare, prenatal vitamins, etc.)                  | \$4,000*        |
| Post birth recovery and final month housekeeping (singleton)                                         | \$1,600*        |
| Contingencies in Carrier Agreement (singleton)                                                       | \$5,400*        |
| Travel for Carrier transfer (including airfare, hotel, rental, childcare, lost wages, per diem etc.) | \$5,000*        |
| Carrier’s local monitoring                                                                           | \$4,000*        |

|                                     |                |
|-------------------------------------|----------------|
| <b>Intended Parent Legal Rights</b> | <b>\$8,000</b> |
| Fees for legal proceedings          | \$8,000        |

**Please check with your accountant as some of the charges listed herein may be tax deductible.**

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#These Fees will be known at time of Match. Fees may be higher than estimated and Intended Parents will be responsible for the higher agreed upon base fee. Circle will be responsible for variances to that higher agreed upon fee.

### IVF Costs

|                                                                                                                                                                                                                                                                                                                                                                |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Single Retrieval and All Transfers<sup>1</sup></b>                                                                                                                                                                                                                                                                                                          | <b>\$29,900</b> |
| Includes:                                                                                                                                                                                                                                                                                                                                                      |                 |
| <ul style="list-style-type: none"> <li>• Single retrieval of eggs</li> <li>• Creation of embryos</li> <li>• All transfers until a live birth is achieved or embryos depleted</li> <li>• IVF costs</li> <li>• Single donor screening</li> <li>• Carrier screenings</li> <li>• Consultations</li> <li>• Medications</li> <li>• On location monitoring</li> </ul> |                 |

### Insurance

| <b>Surrogate with Approved Maternity Insurance</b>                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Surrogate with Lloyds of London Maternity</b>                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Includes:                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Includes:                                                                                                                                                                                                                                                             |
| <ul style="list-style-type: none"> <li>• Up to \$5,000 for additional compensation to Carrier</li> <li>• Third Party Medical Billing Oversight (if any)</li> <li>• Carrier Life Insurance</li> <li>• Carrier Complications Insurance</li> <li>• Co-Payments, Co-insurance, Deductibles</li> <li>• Insurance review, defense &amp; Lloyds guarantee of maternity insurance up to \$500,000</li> <li>• Costs to implement Lloyds “back-up” (if necessary)</li> </ul> | <ul style="list-style-type: none"> <li>• Cost of Lloyds of London Primary Maternity Insurance</li> <li>• Carrier Life Insurance</li> <li>• Carrier Complications Insurance</li> <li>• Co-Payments, Co-insurance, Deductibles including any balance billing</li> </ul> |
| <b>Total Cost</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Total Cost</b>                                                                                                                                                                                                                                                     |
| <b>\$26,000*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>\$26,000*</b>                                                                                                                                                                                                                                                      |

<sup>1</sup> Excludes PGS testing (estimated cost, \$6,000)



**Additional Payments Based on Circumstances**

| <b>Additional Transfer or Mock Cycle</b>                                                | <b>\$0</b> |
|-----------------------------------------------------------------------------------------|------------|
| Transfer payment (paid to Carrier)                                                      | \$0*       |
| Travel for Carrier transfer (e.g., airfare, hotel, rental, childcare, lost wages, etc.) | \$0*       |
| Carrier’s local monitoring                                                              | \$0*       |
| Additional monthly expenses for carrier                                                 | \$0*       |

| <b>Additional Amount for Twin Pregnancy</b>                  | <b>\$11,250</b> |
|--------------------------------------------------------------|-----------------|
| Additional maternity clothing fee                            | \$250±          |
| Multiple birth payment to carrier                            | \$5,000±        |
| Additional bed rest reimbursements                           | \$4,000*        |
| Additional post-birth recovery reimbursement (for C-section) | \$2,000*        |

| <b>Additional If Egg Donor Needed</b>                                                         | <b>\$30,850</b> |
|-----------------------------------------------------------------------------------------------|-----------------|
| Non-refundable Egg Donor Agency Fee                                                           | \$7,500*        |
| Fee for unlimited Egg Donor rematches, including all parties’ representation for agreement    | \$3,500*        |
| Intended Parents’ attorney’s fees for Egg Donor agreement (includes agreements for rematches) | \$1,250*        |
| Egg Donor’s independent attorney’s fees (including donor representation for rematches)        | \$600*          |
| Egg Donor screening and testing fees (including standard personality testing)                 | \$1,000*        |
| Payment to Egg Donor                                                                          | \$9,000±        |
| Travel for Egg Donor screening and retrieval (e.g., airfare, hotel, rental, per diem, etc.)   | \$8,000*        |

| <b>Other Potential Expenses</b>                                                                    |         |
|----------------------------------------------------------------------------------------------------|---------|
| Additional reimbursement to Experienced Carrier or Carrier in high demand state                    | \$5,000 |
| Additional reimbursement to Carrier for matching with SPAR program or with IPs who need translator | \$2,500 |
| Expenses for translator                                                                            | \$3,500 |
| Estimated pumping payments and supplies (if IPs request)                                           | \$2,000 |
| Donor’s local monitoring (if needed)                                                               | \$2,000 |

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