



Broker Information

General Agent Information (if applicable)

Have you run an illustrative quote for this group?

Yes, Quote ID	No

Please include the following:

- ☐ Member Level Census
- ☐ Current carrier renewal offer (for currently self-insured and/or 51-100)
- ☐ Claims experience for last 12 months and large claims report (if currently self-funded in any state or 51-100 fully-insured in Arkansas, Maine, Texas or Nevada)
- ☐ Benefits summary (for currently self-insured and/or 51-100)
- ☐ Proof of Affinity Organization membership (if part of a participating Affinity Organization)