



P O BOX 689070
FRANKLIN, TN 37067

May 15, 2023



1151291-CSGROUP3-IVRBENE-0

RE: [REDACTED]
Coverage ID# [REDACTED]
[REDACTED]

Dear [REDACTED]:

If you wish to designate a beneficiary, please complete the bottom portion of this letter and return it in the envelope provided, or you may also email this document to help@fm-service.com.

Thank you for allowing us to serve your insurance needs. If we may be of further assistance, please contact our Customer Service Department toll-free at 1-(877)-747-6967 or email us at help@fm-service.com. The hours of operation are Monday through Friday 7:00 AM to 8:00 PM.

Sincerely,

Franklin Madison Group LLC
Plan Administrator
Specialist ID: JESCAYCE

Go to fm-service.com to manage your insurance coverage, see your next payment date, and more.

INSURED: [REDACTED] Coverage ID [REDACTED]

**PLEASE UPDATE MY BENEFICIARY DESIGNATION AS FOLLOWS:
(Please print clearly)**

BENEFICIARY _____

BENEFICIARY _____

SIGNATURE _____ **DATE** _____

[REDACTED]

REV 05/22 - B - IVRBENE

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