

Sample Broker of Record Letter (CFMD/DC/VA)
(Must be on the Company's Letterhead)

Date

Broker of Record

Broker Name

Broker Address

Broker City, State and Zip

Re:

Renewal Date:

Group#:

Debbie Taylor
Carefirst BCBS
840 First Street NE
Washington, DC 20065

Dear Ms. Taylor:

This is to notify you that I have appointed **Broker Name** of **Agency Name** whose business address is **Street Address, City, State and Zip** as my broker of record with respect to coverage provided by **Carrier Name**.

This appointment is in conjunction with GBS' as the **Wholesaler or Administrator**.

Sincerely,

Client Name and Title

Cc:

Carriers and Products included in this BOR:

| Carrier | Product |
|----------------|----------------|
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