

# YES, I WOULD LIKE MORE INFORMATION!

Employer Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Employer Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer Phone\* \_\_\_\_\_

Best Time To Call \_\_\_\_\_

Email Address \_\_\_\_\_

Please sign me up for HCR VIP emails!

*\*With my signature, I consent to being contacted by an American Fidelity Assurance Company representative, including by phone, regardless of my status on any Do-Not-Call list:*

\_\_\_\_\_ Date: \_\_\_\_\_

- I need a review of our current Section 125 Plan Document.
- I need a review of our benefits enrollment process.
- We have taken the "it's not broken, don't fix it" approach to our benefit administration – we need to see a better way of doing it.
- I would like more information on HSAs, HRAs, FSAs, or 403(b) Administration.
- I would like to see the latest technology in benefits administration.
- I am not sure if we are offering the right voluntary benefits.
- All that is great, but what I really need to know is \_\_\_\_\_

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**AMERICAN FIDELITY**   
a different opinion