



LAURENCE F. LEE, III

From: Whitney Johnson-Rule for Larry Lee (agent) / M. Lynn Turner (agent)

Date: July 14, 2014

Re: **ABC COMPANY**
Bid Request: Dental, Vision, Life
Effective Date: 10/1

Please immediately complete and return by fax or email, the attached **“Confirmation of Receipt.”**

Please provide a group dental, vision & life quote for ABC COMPANY. This is a clothing manufacturing (sewing) business, situated in Florida (zip: 32224) with locations here and in New York. Please note: this group does not currently have health insurance benefits, but will be putting them in place due to ACA.

All necessary information is provided. Please read this request in its entirety. Should you need further information, questions or if you don't receive all materials below, please contact me immediately. If you receive this information in error, please forward to the appropriate person and contact me. Please quote the following plan design(s), and any other plans you feel may deliver a better value for our client.

Dental: Voluntary
100/80/50
Endo / Perio in Major
Both MAC & UCR
No ortho

Vision: Voluntary
Please quote your most competitive vision plan(s)

Life: ER Paid both 25K & 50k

- Information Attached: Census

- Background

Full-Time: 30 hours per week

PLAN ANALYSTS

1 Independent Drive, Suite 3125 • Jacksonville Beach, FL 32202 • (904) 354-8989 • FAX (904) 830-4862
• EXCELLENCE IN EMPLOYEE BENEFITS •

Eligibility: 1st of the month following 60 days
Effective Date: 10/1/14
Provide Quotes By: 8/4/14
Commission: Flat 10%

In the interest of time and keeping *your* work to a minimum, we welcome your informal proposals via email. Also call if you wish to discuss your competitiveness on this case. If you should have any questions regarding this case, please call our office at (904) 354-8989.

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ABC COMPANY
Bid Request

Confirmation of Receipt

_____ Page(s) Including this page.

To: Whitney Johnson-Rule
Email: wjohnson-rule@plananalysts.com
Co/Dept: Plan Analysts, Inc.
Re: **ABC COMPANY Bid Request**

I. Please initial all applicable boxes below and return by email/fax **immediately**.

1. I have received the request for proposal for ABC COMPANY
2. I intend to issue a proposal to: Plan Analysts, Inc.
 To someone other than Plan Analyst
Who: _____
3. I do **NOT** intend to issue a proposal.
Reason: _____

II. I Do / Do Not agree to keep the information contained in this package CONFIDENTIAL. My company will not disclose this information or ABC COMPANY and/or its subsidiaries.

Name: _____

Signature: _____

Company: _____ Date: _____

III. This Information came to me in error.

It will **not** be forwarded. It will be destroyed.

It will be **forwarded** to the party below to respond to this RFP:

Name: _____

Phone: _____ Fax: _____

E-mail: _____ Dept: _____

PLAN ANALYSTS