

Client Focus Connections  
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Port Edwards, WI 54469  
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Email cfc@wctc.net

\_\_\_\_\_  
\_\_\_\_\_  
Insurance  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Office \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_

Hi, my name is \_\_\_\_\_. I'm calling on behalf of your agent \_\_\_\_\_  
with \_\_\_\_\_ Insurance.

I'm following up on some information that \_\_\_\_\_ mailed to you regarding  
Medicare Supplement Insurance. This is not duplicate coverage. It was developed to  
make sure you're protected for medical expenses not fully covered by Medicare.

\_\_\_\_\_ is wondering if he/she can sit down and discuss the benefits of this  
coverage with you.

YES – When is a good time for \_\_\_\_\_ to reach you?

NO – Are there any other insurance needs that \_\_\_\_\_ can help you with at this time?

Thank you and have a good evening.

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~ If Medicare changes the amount they pay for a particular expense, you can be assured  
\_\_\_\_\_’s policy will reflect a similar change.

~ You can choose the policy and coverage’s to suit your individual needs.