

Agent of Record Letter

Your Name: _____

Address: _____

City, State, Zip: _____

Date: _____

Insurance Company: _____

Dear (*Insurance Company*) _____:

I have appointed the following agency as my Agent of Record:

Foye Insurance Agency
PO Box 186
Marquette MI 49855
(906) 226-6610

This letter gives the above agency exclusive rights to the use of (*Insurance Company*)
_____ products and services on my behalf.

This letter also replaces any and all previous Agent of Record letters, and terminates the rights of any other (*Insurance Company*) _____ agent to service my insurance needs.

Very truly yours,

(*Your Signature*): _____

(*Your Name*): _____