

Have you updated your information lately?

To provide you the best service, especially in the case of an emergency, we need your up to date contact information. Remember, in the case of an emergency you will not be at work so please provide your personal information. This information is for TBL records only and will **NEVER** be shared with anyone.

Name: _____ Date: _____

Home Address: _____

City: _____ State: MI Zip: _____

Personal Phone: _____ Personal E-mail: _____

Law Enforcement Officer? Firefighter? Dispatch/Clerk?

Other Title: _____

Department: _____

Primary Beneficiary's name: _____

Beneficiary's relationship to you: _____

Contingent Beneficiary: _____

Contingent's relationship to you: _____

Current Payment Method: ACH Payroll Deduction Union Paid

Please send this form to: TBL of Michigan, P.O. Box 532133, Livonia, MI 48153
Or send an e-mail with the above info to: kelly@tblofmi.com

