Physicians Insurance
A MUTUAL COMPANY

Dividend Check Request

If you prefer to receive your 2019 dividend by check, please submit this completed form to Physicians Insurance by February 14, 2020. You can submit this form by e-mail at talktous@phyins.com or by fax at (206) 343-7100.

In order for check requests to be processed, this form needs to be completed in its entirety.

Account Name:

Payee Name:

Policy Number:

Mailing Address:

E-mail:

Phone Number:

Signature: _____ Date: _____