



Blue Cross® Blue Shield® of Michigan and Blue Care Network 2022 Medicare Supplement Supply Request Form

2022 Medicare Supplement Kits	
2022 Medicare Supplement Enrollment Kit	Qty _____
2022 D/V/H Supplement Kit	Qty _____

Please complete this form and email it to supplies@tggolutions.com or submit your request via fax at 877.329.2844 with the following information:

Ship to my preferred address Pick up order from TGG Solutions (Grand Rapids office only)

Order date: _____

First/last name: _____

Agent ID: _____

Phone: _____

Email: _____

Preferred address (no P.O. Box):

