Report Request Form Template

SECTION 1: Requestor Information					
Requestors Name:					
Date o	f Request:				
Date Report Needed:			<u> </u>		
Accou	nt Name(s):				
SECTION 2: Report Requests <u>Member Benefit Report</u>					
2.	Date Range: Dues Included (Y/N): Preferred Format:		□ Last Full Year □ Year over Year □ Year to Date □ Yes □ No □ Word □ PDF □ Other:		
Committee and Study Group Engagements Report					
2.	Committee/ Study G Committee/Study G Preferred Format:			□ LIMRA □ LOMA □ LIMRA □ Yes □ No □ Word □ PDF □ Other:	
Executive Engagement Snapshot					
2.	0		□ Last Full Year □ Year over Year □ Year to Date □ All □ Segment 1 □ Segment 2 □ Segment 3 □ Se □ All □ Other:		
4.	Member Engagement Opportunities Page: (Y/N): 🗆 Yes 🗆 No				

SECTION 3: Additional Information

1. Special Instructions or Notes: _____

All requests must include this Report Request Form and should be forwarded to Renae Walker and Nancy Moquin *at least* 48hrs in advance of the date the report(s) is/are needed. Your primary support person will complete the request on your behalf. If they are out of the office, then their backup person will handle your request.

Note: Depending on the report requests & workload, reports might be provided prior to the 48hrs. Report requests could take 48 hours or longer in situations where a support staff member is out of the office or handling other projects, as well as based upon the complexity of the report. If additional time is required for more in-depth reporting, a support staff person will reach out to discuss your specific situation.

Acknowledgment: By submitting this form, I acknowledge and understand the processing timeline provided above.