

# Request for Copies



State of Wisconsin  
Office of the Commissioner of Insurance  
P. O. Box 7873  
Madison, WI 53707-7873  
Fax: (608) 267-1236  
Web Address: [oci.wi.gov](http://oci.wi.gov)

Name			
Company			
Mail Address			
City	State	Zip Code	Phone No.
Bill to			

Copy cost is \$.15 per page.

If overnight service is requested, name of carrier and account number:

Requesting (please check all items requested)

- Rates and/or Rules
- Forms
- Policy
- Endorsements
- Annual or Quarterly Statements
- Articles and Bylaws
- Other \_\_\_\_\_

Research on Company(ies)

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Specifically describe the details of your request

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Timeframe of material (recent, last two years, last five years)