

# Georgia Health Coverage



**Call For Service  
(404) 663-8751**

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**Send us a referral for Health Insurance  
and enjoy a taste of the world's finest coffee!**

Your name \_\_\_\_\_ Ph ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Address to send your *Giftcard*: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of referral: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Please check at least one type of insurance:

Health                       Dental                       Supplemental

**FAX THIS FORM TO: 404.795.0486**

John B. Williams, Jr.  
Servicing Agent

**Georgia Health Coverage**  
**Client Services Division**  
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