

## **Voluntary Plan Cancellation Form**

Please select the plan(s) you wish to cancel:

American Fidelity	The Hartford (FBC)
☐ Accident	$\square$ AD&D
☐ Cancer	☐ Life
☐ Disability	UNUM
□ Life	☐ Long-term Care
The Standard	VOYA
☐ Disability	☐ Life
□ Life	Texas Life
Hyatt Legal	☐ Life
☐ Pre-paid Legal	
	of this plan, nor the coverage therein and I wish to discontinue my atary plans deducted pre-tax may only be cancelled at the end of the  Date Signed
Employee Signature	Employee ID
Policy #	Cancellation Effective Date