

37-18 Northern Blvd., Long Island City, NY 11101 718.392.0200 | www.smpcorp.com

Voluntary Benefits Payroll Deduction Cancellation Form

If you wish to cancel the deductions for any or all of your currently in-force policies, simply check the box next to all policies you wish to cancel deductions for. After your deductions are canceled, you may receive a letter from **Reliance Standard** providing you with the opportunity to maintain your policy via direct bill. Please contact Reliance Standard directly to cancel your policy (see more information below).

Check the applicable box below	Policy	Payroll Deduction Code (For HR Purposes only)
	Reliance Standard Voluntary Term Life	H&W
	Reliance Standard Voluntary Term Spouse Life	H&W
	Reliance Standard Voluntary Term Child Life	H&W
	Reliance Standard Short-Term Disability	STI
	Reliance Standard Critical Illness	CRA
	Reliance Standard Accident	ACA
	Reliance Standard Hospital Indemnity	HIA

Important Note about Reliance Standard Policies

Additional forms are available	on <u>www.SMPbe</u>	enefits.com unde	er Reliance Matr	<u>ix – Disability,</u>
Voluntary & Life Insurance.				

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I, the undersigned declare that I wi	sh to cancel the deductions for the policies indicated on this
form effective	. I have full knowledge of these plans and understand
that by choosing to cancel payrol	ll deductions, I may lose any coverage provided under
them. I also understand that I will	not be able to re-enroll for these coverages until the next
designated Voluntary Benefits Ope	en Enrollment period.
Signature	
Printed Name	
Date	