



St. Clair County ALABAMA



*St. Clair County Commission
165 5th Avenue Suite 100
Ashville, Alabama 35953
(205) 594-2100
Fax (205) 594-2110*

I request to cancel the listed Insurance Policy. I no longer authorize this payroll deduction.

Name: _____ **SS#** _____

PROVIDER	GROUP #	COVERAGE/POLICY #	DEDUCTION AMOUNT
AFLAC	OD095	_____	_____
COLONIAL	E8361024	_____	_____
LIBERTY	15064	_____	_____
Life Ins. Of AL	GP00115433	_____	_____
Mutual of Omaha	G000AQB4	_____	_____
VSP	25998	_____	_____

Employee Signature: _____ **Date:** _____

Please submit these changes to Jennifer Forman in Human Resources.