

PB_Name: James Sample
PB_Address1: 84 Court
PB_Address2: Apt. 287
PB_CityStateZip: Cochester, VT 05446
PB_Insert_Feeder: 000000
PB_Server_ID: 9
PB_Job_ID:
PB_PlanetCode_ServiceCode: 40
PB_Mailing_ID:

RE: Cancellation Notice

Participant Name: James Sample
Account Number: 0909100411
Employer / Plan Sponsor: Sample Company Inc

Dear James Sample,

Please accept this notice that your continuation coverage under Sample Company Inc's group health plan has terminated for the following reason:

Expired Without Election.

The person(s) listed above did not elect Continuation Coverage on or before the election expiration date.

Your continuation coverage ended on 8/31/2020.

If you submit any further premium payments, these payments will be refunded to you. WageWorks is not liable for coverage during the period after it receives a further premium payment from you and before it issues a refund check.

An individual conversion health insurance policy may be available to the individual(s) named above. Contact your insurance carrier as soon as possible for more information, as there may be a limited time period for enrolling in a policy.

If you have any questions, please contact us at 888-678-4881.