NOTICE TO REJECT COVERAGE UNDER ILLINOIS WORKERS COMPENSATION LAW

Effective 6-1-2015, Illinois Workers Compensation Law has changed regarding LLC members, corporate officers, sole proprietors and partners. All LLC members, corporate officers, sole proprietors and partners are automatically covered under the Illinois Workers Compensation Act unless they elect <u>not</u> to receive such coverage.

Since this ruling affects your coverage and premiums, we are requesting a complete list of all sole proprietors, partners, members and corporate officers that elect not to be covered under the Illinois Workers Compensation Act and the Workers Compensation policy.

Insured Name:	
Address:	
Entity: Sole Proprietor Partne	r Corporation Limited Liability Corporation
Policy Period: From	to
	ber(s) or corporate officer(s) of the above referenced business do Compensation Act and the Workers Compensation policy.
Type or print each name and title under signa	ature.
Signature	Percentage of ownership
Name and Title:	
Signature	Percentage of ownership
Name and Title:	
Signature	Percentage of ownership
Name and Title:	
Effective date of Rejection	Date signed:
Use additional copies as needed.	