SECTION 125 CAFETERIA PLAN
CHANGE or REVOCATION of BENEFIT ELECTION FORM

COMPANY/ DISTRICT NAME: ______________________________

EMPLOYEE NAME: ____________________ **SS#:** ____________________

ADDRESS: ____________________ **PHONE#:** ____________________

I have experienced the following change in status (must be within the last 30 days) and wish to change/revoke my existing cafeteria plan election and make a new election for the remainder of the current plan year.

PLEASE INDICATE APPROPIATE CHANGE	DATE CHANGE OCCURRED
☐ Marriage or Divorce	________
☐ Death of spouse or dependent	________
☐ Birth or Adoption of a child	________
☐ Termination or commencement of employment self	________
☐ Termination or commencement of employment spouse	________
☐ Job status (part time/full time) for employee or spouse	________
☐ Significant change in insurance premium or coverage	________
☐ Significant change in cost of dependent care	________
☐ Administrative Error (Attach explanation)	________
☐ Other: ____________________	________

	BENEFIT	*FROM*	*TO*	*PAYROLL EFFECTIVE DATE*
1.		$	$	
2.		$	$	
3.		$	$	

I understand that if there is an interruption of monthly payments I will be terminated until the next open enrollment. I may choose to keep my coverage current, however, I must be personally responsible for making the monthly premium payments to my employer.

I certify that the above information is true and correct to the best of my knowledge. I understand that my benefit election agreement shall remain in effect with regards to other benefit coverage's, if any, which are not listed above. I further understand that this change will become effective in fifteen (15) days or at the next pay period (whichever occurs last) after being received by my employer.

______________________________ ______________________
Employee Signature Date

______________________________ ______________________
Employer/ Plan Representative Signature Date

NATIONAL PLAN ADMINISTRATORS, INC.
P. O. Box 161630, Austin, TX 78716
PHONE: (512) 327-6481 OR (800) 880-2776
FAX: (512) 275-9396 OR (800) 982-8140