

Please check the box next to your insurance company's name.

Central United Life

Investors Consolidated

Sun America

Loyal

Gold Cross

UniLife

Unum

American States

10700 Northwest Freeway, Third Floor, Houston, Texas 77092

HEALTH POLICY CANCELLATION

I request cancellation of Policy Number: _____

Dated at _____ this _____ day of _____ 20____.

Policyholder's Signature _____

Telephone Number: _____