

NMI SETTLEMENT FUND

POST OFFICE BOX 501247, SAIPAN, MP 96950

Election to Continue or Reject Life Insurance

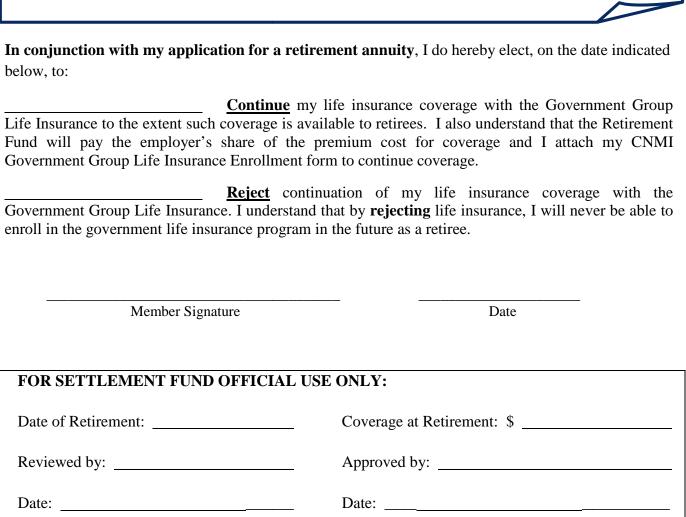
For use by retiring Employees only

INSTRUCTION:

This form must be completed:

- 1) by an active member who is currently enrolled in the government group life insurance program; and
- 2) at the time of retirement to let us know if you wish to continue or reject the government life insurance coverage you are with while actively employed.

PLEASE TYPE OR PRINT LEGIBLY. THANK YOU.



SF-2F (REV. 01/2015)
