



The United States Life Insurance Company in the City of New York
New York, New York

Administrative Office: Attn: Client Services 3-A, 3600 Route 66, P.O. Box 1583, Neptune, NJ 07754-1583
Phone: 1-800-346-7692 Fax: 1-732-922-7604

Group #: _____

Group Name: _____

Salary Changes:

Name	Certificate Number	Effective Date	New Salary
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Termination of Employment:

Name	Certificate Number	Term. Date	Reason for Termination
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Please fax this form to us at 732-922-7604.

Signature: _____ Date: _____

Title: _____

Phone #: _____