YES! I want to keep my Colonial Life Coverage.

Colonial Life®

My premiums are no longer being payroll-deducted.

Complete this form and mail it today — along with a check for your premium payment.

Did you know that you can continue your coverage online at coloniallife.com? See below for information.

Name: _____ Daytime Telephone Number: (____) _____

Mailing Address: _____ Social Security Number or Date of Birth:_____

City: _____ State: _____ Zip:_____

Policy number(s) to be continued:

_____, _____, _____, _____,

Which Colonial Life & Accident Insurance do you want to continue? (check one or more)

◯ Accident ◯ Disability ◯ Hospital Income ◯ Dental ◯ Cancer or Critical Illness ◯ Life

Please choose one of the following payment options:

☐ 1. Deduct premiums monthly from my bank account.

☐ 1st-5th ☐ 6th-10th ☐ 11th-15th ☐ 16th-20th ☐ 21st-26th

Your draft will occur on one of the dates within the range you have selected. Please include a voided check or

Routing #_____ and Account #_____

_____
Signature of bank account owner

☐ 2. Bill me directly. (choose one of the following)

☐ Quarterly (Submit a payment 3 times your monthly premium)

☐ Semi-annually (Submit a payment 6 times your monthly premium)

☐ Annually (Submit a payment 12 times your monthly premium)

Date:_____ Policy Owner's Signature:_____

Return To:

Colonial Life & Accident Insurance Company
P.O. Box 1365
Columbia, South Carolina 29202
1.800.325.4368 (phone)
1.800.561.3082 (fax)

OR

***Save time and postage by going to: coloniallife.com to elect electronically to continue your coverage by changing in the portal your payment method and epaying premium due.**

Colonial Life products are underwritten by Colonial Life & Accident Insurance Company, for which Colonial Life is the marketing brand.