

CHILDREN'S EQUITY ACT NOTICE

This is to notify you that we are attaching a court order in accordance with the FEHB Children's Equity Act of 2000. Please flag the retirement file to ensure this annuitant provides health insurance coverage for each child listed below. The annuitant may not change to a self only plan, cancel or suspend his or her FEHB coverage, or change to an HMO that does not serve the area where each child lives while eligible for coverage.

EMPLOYEE'S NAME:

SOCIAL SECURITY NUMBER:

EFFECTIVE DATE OF COURT ORDER:

NAME OF CHILD:

DOB:

1)

2)

3)

4)

5)