COBRA Subsidy Eligibility for Member Company EMPLOYERS of AAAS Employee Benefit Fund Participating in Group 97782

MEWA Fund Group Name: <u>Automotive Aftermarket Association Southeast</u>

Group Number: 97782 Economy health plan

COBRA Group/Division Number: 97782/Z1S

<u>EMPL</u>	OYER's employee group Billing Address (bill COBRA subsidy to the EMPLOYER's address below):
EMPLOYER Name:	
EMPLOYER Billing Address:	
EMPLOYER City, State, Zip:	
EMPLOYER Group/Division Number:	97782/
EMPLOYER Phone Number:	
EMPLOYER Contact Name:	

Contract Number	Last Name	First Name	Social Security Number	COBRA Subsidy Eligible Qualifying Event T = Involuntary termination of employment OR H = Involuntary reduction of work hours