



## Termination confirmation letter

Hello,

We have received your request to terminate your contract with Beam Benefits. We kindly ask that you complete the information below and return it back to us at [adminsupport@beambenefits.com](mailto:adminsupport@beambenefits.com) as soon as possible.

Please be advised that by requesting this termination, you are responsible for notifying the insured members of the plan that their coverage with Beam Benefits has been terminated effective the date agreed upon by the Policyholder and Beam.

In addition, we would appreciate any feedback that you may have for us regarding your experience with Beam. We value our relationships, and are always looking for ways to improve!

Sincerely,  
The Beam Benefits Admin Team

### Please fill out the following information:

**Group number:**

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**Group name:**

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**Termination date:**

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**Reason for  
termination/feedback:**

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**Signature:**

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**Title:**

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