



711 N. Pennsylvania Street | Tyndall-Moorehead Armory
Indianapolis, IN 46204 | 317.247.3301

I am requesting a cancellation of my SSLI coverage I maintain through NGAI.

Please cancel coverage for the following (check all that apply):

Member: _____ Spouse: _____ Dependent: _____

Member Information:

First Name: _____ Last Name: _____

SSN: _____

Reason for Cancellation:

Signature: _____

Date: _____