

NOTIFICATION PAGE

I acknowledge that I have been given access to, and have reviewed, the following Required Notices:

- Summary Plan Description (Welfare Benefit Plan)
- 2020 CHIP Notice
- 2020 WHCRA Enrollment Notice
- 2020 Special Enrollment Notice
- 2020 SBC (Summary of Benefits & Coverage)
- Medicare Part D Creditable Coverage Notice
- BCBS Certificate of Coverage (Including Initial COBRA Notice, ERISA Rights, FMLA Rights)
- Non-Discrimination Notice

I understand that if I request a paper copy of the above notices, one will be supplied to me free of charge by contacting Tami Ashley at tashley@srcorp.org, or calling 843-448-2646, or by mail at P.O. Box 3647, Myrtle Beach, SC 29578.

If I wish to withdraw my “Electronic Disclosure & Consent” form, I must do that in writing by sending the request to: Southeast Restaurants Corp., Attn: Tami Ashley, P.O. Box 3647, Myrtle Beach, SC 29578. If consent is withdrawn, it will only be effective for those documents not yet issued, and for the documents specified in my written notice.

Signature

Date

Printed Name