



**RWAM INSURANCE
ADMINISTRATORS INC.**

49 Industrial Drive, Elmira, Ontario N3B 3B1
Tel. (519) 669-1632 Our Compliments 1-877-888-RWAM (7926)

Fax: (519) 669-1923
Attention: Group Administration Department

Report of Employee Transactions

Group Policy #

Division #

Name of Policyholder

		<u>ADDITIONS</u>		<u>TERMINATIONS/LAY-OFFS</u>		<u>CHANGES</u>			<u>TRANSFERS</u>			
CERTIFICATE #	EMPLOYEE		New	Re- instatement	DATE OF TERMINATION/ RE-STATEMENT OF EMPLOYMENT yyyy / mm / dd	Status Change	NEW OCCUPATION	NEW WAGE	HRS/ WEEK	DATE OF CHANGE OF OCC., WAGE, ETC. yyyy / mm / dd	DATE OF TRANSFER yyyy / mm / dd	NEW GROUP, DIVISION, CLASS
	First Name	Surname										

Please enclose the applicable forms/cards that correspond with the above transactions.
Additional Comments

It is not necessary to return Drug Cards for terminated employees – please destroy them.

Date: _____ Signature of Authorized Administrator: _____