



Conversion Request Form

CALIFORNIA ASSOCIATION OF COLLECTORS GROUP POLICY (GROUP 562)

Name of Business: _____

Address: _____

City, State, Zip Code: _____

To Whom It May Concern:

State Compensation Insurance Fund is currently providing coverage for our workers' compensation insurance.

Individual Policy Number: _____

Expiration Date: _____

Please consider this document as authorization to transfer my individual policy into the CAC group policy with State Fund. I am currently a member of the CAC.

Principal Owner's Signature _____

Date _____

If this is a Brokered Policy, a Broker signature is required to request conversion review.

(Broker Signature)

Return completed and signed form to State Fund via:

Fax: (916) 263-5323

OR mail: 2300 River Plaza Drive, Ste. 150, Sacramento, CA 95833

Under California Law it is unlawful for an insurer to promise the future payment of dividends under an unexpired workers' compensation insurance policy or to misrepresent the conditions for dividend payment. Dividends are payable only pursuant to conditions determined by the Board of Directors or other governing board of the Company following policy expiration. It is a misdemeanor for any insurer or officer of agent thereof, or any insurance broker or solicitor, to promise the payment of future workers' compensations dividends. Past dividend performance is no guarantee of an insurer's future dividend performance.