



**LOS ANGELES POLICE PROTECTIVE LEAGUE**

1308 West Eighth Street, Los Angeles, CA 90017 • Tel: (800) 736-7070 • Fax: (213) 386-3121 • <http://lapd.com>

Verification of Dependents

MEMBER INFORMATION		
MEMBER (FULL NAME)	SERIAL #	SOCIAL SECURITY NUMBER

SPOUSE / DOMESTIC PARTNER <sup>†</sup> INFORMATION				
FULL NAME	DATE OF BIRTH	GENDER IDENTITY	SOCIAL SECURITY NUMBER	DATE OF MARRIAGE/DP

DEPENDENT CHILDREN INFORMATION				
FULL NAME	DATE OF BIRTH	GENDER IDENTITY	SOCIAL SECURITY NUMBER	DISABLED?

I understand that I have 60 days from my dependent(s) effective date(s) of coverage to submit proof of eligible dependent status, such as a copy of a certified marriage certificate, copy of a certified birth certificate, or commemorative hospital birth certificate that lists the names of both parents. If I fail to submit the required proof within the 60-day period, my dependent(s) coverage will automatically be cancelled on the first day of the month following the expiration date of the 60-day period. I will then be required to wait until the next annual open enrollment period to re-enroll my dependent(s) and submit proof of dependent status. Any medical or dental expenses my dependent incurs after coverage is cancelled will be my responsibility.

I acknowledge that if any of the dependents that I list above, or any dependents that I add to my coverage in the future, do not meet or no longer meet the eligibility requirements as required by the insurer, I will be liable for full repayment of any benefits and/or subsidies paid on behalf of the ineligible dependent and that I may be subject to legal remedies and/or disciplinary action for falsifying this document and/or future enrollment documents.

I understand that if I don't notify LAPPL within 31 days from the date that my covered dependent(s) is/are no longer eligible, the ineligible dependent's coverage will be terminated retroactively to the first of the month following the date the dependent becomes ineligible and I will be liable for full repayment of any benefits and/or subsidies paid on behalf of the ineligible dependent.

MEMBER SIGNATURE	
DATE	SIGNATURE

<sup>†</sup> Adding a domestic partner requires legal and valid registration of a domestic partnership or approval by the City of Los Angeles. For more information, call the City of Los Angeles Employee Benefits Department at (213) 978-1600