## ACORD NOTICE OF CORPORATE OFFICER TO EMPLOYER OF ELECTION NOT TO ACCEPT PROVISIONS OF THE "WORKERS' COMPENSATION ACT" OF TENNESSEE

## MAIL TO:

TENNESSEE DEPT OF LABOR DIVISION OF WORKERS COMPENSATION NASHVILLE, TENNESSEE 37243-0661 Not effective until 30 days after Tennessee Department of Labor acceptable stamp date

COMPLETE ONE FORM FOR EACH CORPORATE OFFICER
Send form in duplicate with postage paid envelope for acknowledgement

ORIGINAL TO BE SENT TO THE DIVISION OF WORKERS' COMPENSATION WITH ALL PARTS FILLED OUT, AND PROPERLY SWORN TO BEFORE NOTARY PUBLIC OR OTHER OFFICIAL.

EMPLOYER	
CORPORATE OFFICER	
NAME OF EMPLOYER	
(1) Location Street City State	Zip
You are hereby notified that the undersigned corporate officer (Name) elects not to be bound by the provisions of the Tennessee Workers' Compensation Act in complia 50-6-104 of the said "Workers' Compensation Act".	nce with Section
Signed this, 19	
Corporate Officer Signature	
Title of Corporate Officer	
Social Security #	
(2) This is to certify that the corporate officer (Name)	
has this day served proper notice on his-her employer in the form above set forth, to the effect of his-her election not to accept the provision of the "Workers' C	ompensation Act".
Signed this day of, 19	
Employer Signature	
Official	
Federal Employer Identification Number	
(3) The undersigned, being duly sworn, deposes and says that he-she is a corporate officer of	
and that he she has duly served	(employer name)
, and that he-she has duly served election not to accept the provisions of the "Workers' Compensation Act" of Tennessee, and that his-haccept the provisions of said Act was not advised, counseled or encouraged by the said employer acting for said employer, in compliance with the provisions of Section 50-6-104(b) of the Tennessee	(employer name) notice on his-her er election not to er, or by anyone
election not to accept the provisions of the "Workers' Compensation Act" of Tennessee, and that his-haccept the provisions of said Act was not advised, counseled or encouraged by the said employed	(employer name) notice on his-her er election not to er, or by anyone
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election not to accept the provisions of the "Workers' Compensation Act" of Tennessee, and that his-h accept the provisions of said Act was not advised, counseled or encouraged by the said employer acting for said employer, in compliance with the provisions of Section 50-6-104(b) of the Tennessee Signed this day of, 19  Signed by corporate officer	(employer name) notice on his-her er election not to er, or by anyone Code Annotated.

ACORD 171 TN (4/96) © ACORD CORPORATION 1996