

To: Nebraska Workers' Compensation Court
P.O. Box 98908
Lincoln NE 68509-8908
(402) 471-6468 (Lincoln & Outstate Only)
(800) 599-5155 (Nebraska Only)

NWCC Form 10T (Rev. 12/96)

(For Court Use Only)

CORPORATE EXECUTIVE OFFICER — TERMINATION OF WAIVER

Executive Officer Name _____
Corporation Name _____
Address _____
Office Held in Corp. _____

I wish to terminate the executive officer waiver which was filed about _____,
and become subject to the provisions of the Nebraska Workers' Compensation Law.

_____ **Date** _____
(Officer Signature)

INSTRUCTIONS

1. Type or print in ink clearly. Original must be filed with the Court.
2. A waiver *may not* be terminated until one year after the waiver has become effective.
3. The termination becomes effective upon receipt by the Court.
4. A copy of the termination must also be filed with the secretary of the corporation.
5. It is advisable that you file one copy with your insurance company and retain one for your files.