

## KANSAS CANCELLATION OF ELECTION OF COVERAGE FOR PERSONS PERFORMING PUBLIC SERVICE

## DIVISION OF WORKERS COMPENSATION KS Department of Labor

800 S.W. Jackson Street, Suite 600 Topeka, Kansas 66612-1227 Phone: 785-296-3441 - Fax: 785-296-0839 Web Site: www.dol.ks.gov

CANCELLATION OF ELECTION OF EMPLOYER TO PROVIDE WORKERS COMPENSATION COVERAGE FOR PERSONS PERFORMING PUBLIC OR COMMUNITY SERVICE AS A RESULT OF A CONTRACT OF DIVERSION, ASSIGNMENT TO A COMMUNITY CORRECTIONS PROGRAM OR SUSPENSION OF SENTENCE OR AS A CONDITION OF PROBATION OR IN LIEU OF A FINE.

NOTICE: To be processed, <u>ALL</u> entries on this form must be completed. All entries, except signatures, must be neatly printed in black ink.

NOTE: This Cancellation of Election is effective upon receipt by the Kansas Division of Workers Compensation.

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Employer Name: _	
Employer Address:	
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ereby cancels its previous	s election to provide workers compensation coverage for persons performing public or
ommunity service as a re	esult of a contract of diversion, assignment to a community corrections program or as a condition of probation or in lieu of a fine within the provisions of the Kansas
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	Valid Signature of Employer or Authorized Representative
	Title of Signing Individual

K-WC 135a (Rev. 10-04)