

POLICY NO.

THE STATE INSURANCE FUND

DATE 5/13/2013

199 CHURCH STREET NEW YORK, N.Y. 10007-1173

AMOUNT DUE
\$3,323.76

TELEPHONE (212) 312-7500

NOTICE OF
CANCELLATION

BY REASON OF YOUR DEFAULT IN PAYMENT OF PREMIUMS, YOU ARE HEREBY NOTIFIED THAT EFFECTIVE 12:01 A.M. ON 6/03/2013, YOUR WORKERS' COMPENSATION POLICY IS CANCELLED AND THE INSURANCE THEREUNDER IS TERMINATED. This notice is sent in compliance with the provisions of Section 54, Subdivision 5 of the New York Workers' Compensation Law.

IMPORTANT - PLEASE NOTE

To prevent your policy from being cancelled, you must pay the amount due before 12:01 a.m. on the effective date of the cancellation. Any payment or credit adjustment thereafter will not reinstate your policy. It will be credited to your account. Any credit balance remaining after final audit will be refunded.

Section 93-b of the Workers' Compensation Law states :

"An employer, whose policy of insurance has been cancelled by the State Insurance Fund for non-payment of premium, is ineligible to contract a subsequent policy of insurance with the State Insurance Fund while the billed premium on the cancelled policy remains uncollected."

You should also be aware that there may be additional penalties and obligations imposed upon you by Chapter 55 of the Laws of 1992 and/or the policy contract.

Jeffrey Epstein
CREDIT AND COLLECTION MANAGER

THIS CANCELLATION NOTICE APPLIES TO THE FOLLOWING :

NES LLC
9 EAST 71ST STREET
NEW YORK

NY 10021

CACROT/SSM