

Date:

## Formal Request for Summary Plan Description (SPD) Document

Employee Name:

Phone Number:

Date of Birth:

Insurance ID:

Group Number:

Plan Code:

Hello,

I am writing to formally request a Summary Plan Description (SPD) Document for my plan listed above. As a beneficiary, a copy of the SPD should be provided within 30 days upon receipt of this document under the ERISA Law. I am currently in the process of obtaining funding for a PediaLift Infant access device and a copy of my Summary Plan Description is needed promptly.

My SPD can be mailed directly to PediaLift:

PediaLift LLC

181 Illinois Ave.

Mansfield OH 44905

[funding@pedialift.com](mailto:funding@pedialift.com)

Or if faxing is easier, the fax number: 888-805-9060

I appreciate a prompt response to this request, should you have any questions please reach out to me.

Sincerely,