



Debit Card Substantiation Cancellation Form

By completing this form, Aptia is authorized to discontinue receiving Debit Card Substantiation Files from the carrier listed below. Aptia does require a IO business day notice to guarantee no files will process as of the requested date below.

Company Name	Tax ID Number or Company Code
Medical Carrier Name	
Dental Carrier Name	
Vision Carrier Name	
Last processing date (mm/dd/yyyy) — Aptia requires at least ten business days notice to	o guarantee no files will process as of the date above.
Employer Signature	Date