



Regence

Regence BlueCross BlueShield of Oregon is an Independent Licensee of the Blue Cross and Blue Shield Association

Regence Business Certification (Clark Co., WA)

This form should only be completed for owners and partners that do not appear on the group's Form 5208 or payroll records. If you are completing this form you must provide the additional documentation specified on the Oregon and Clark County Small Group Verification Form. Please acknowledge that the owners and/or employees work the required number of hours listed below.

Legal Business Name

Telephone Number

DBA Name (if applicable)

Business Mailing Address

State Business Registry/EIN Number

Name	Title	Weekly Work Hours	Date of Hire
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

After an appropriate review of business records, I _____ Name/Title

certify the information listed above is accurate for the group named below:

Group Name

Signature

Date

Upon final review by Regence, additional documentation may be requested.

