

Section Name	Field Name	Field and/or Section Description
<b>TITLE</b> ACORD 171 CO (2006/01)	<b>Rejection of Coverage By Corporate Officers or Members of a Limited Liability Company</b>	Use this form to notify the Colorado Division of Workers Compensation, Employer Compliance Unit, that an employee who is an officer of a corporation or a member of a limited liability company elects to be excluded from workers compensation insurance coverage.