

Section Name	Field Name	Field and/or Section Description
TITLE ACORD 171 CT (2006/08)	Workers' Compensation Commission of Connecticut Coverage Election by an Employee Who is an Officer of the Corporation, Manager of an LLC, or a Member of a Multiple-Member LLC	Use this form to notify the Workers' Compensation Commission of Connecticut that an employee who is an officer of a corporation, a manager of an LLC or a manager of a multiple-member LLC, elects to either be excluded from workers compensation coverage, or to revoke any previous election of exclusion. The notice becomes effective only after served upon the employer and the District Compensation Commissioner by personal delivery, registered or certified mail.