

## [Demo] NLP Dataset for Customer Service Automation

<b>Company Type</b>	Health Insurance Companies
<b>Inquiry Category</b>	Billing inquiries and dispute resolutions
<b>Inquiry Sub-Category</b>	Termination of Coverage
<b>Description</b>	Inquiries regarding the cancellation or termination of health insurance coverage, including reasons, effective dates, and potential reinstatement options.
<b>Data Size</b>	6,133 paraphrases
<b>Want to buy data?</b>	Please contact <a href="mailto:nlp-data@gross.me">nlp-data@gross.me</a> via your business email address.

**Masked sample paraphrases of one "Health Insurance Company" customer inquiry. (Purchased data will not be masked.)**

What \_\_\_\_ the \_\_\_\_ my coverage \_\_\_\_?

Is \_\_\_\_ cancellation of \_\_\_\_ in \_\_\_\_?

\_\_\_\_ when \_\_\_\_ coverage \_\_\_\_ end.

\_\_\_\_ lose \_\_\_\_ a date?

Please \_\_\_\_ demise of insurance.

What \_\_\_\_ the \_\_\_\_ for \_\_\_\_ coverage?

\_\_\_\_ I get no \_\_\_\_?

Does \_\_\_\_ for ending my policy \_\_\_\_ determined \_\_\_\_?

The day \_\_\_\_ terminates \_\_\_\_ effective?

When do coverage \_\_\_\_?

\_\_\_\_ you tell \_\_\_\_ when \_\_\_\_ coverage \_\_\_\_.

\_\_\_\_ an effective date for \_\_\_\_.

Does \_\_\_\_ have information about \_\_\_\_ of my \_\_\_\_?

What is \_\_\_\_ when \_\_\_\_ policy \_\_\_\_ canceled?

\_\_\_\_ when my \_\_\_\_ terminates effective?

Tell \_\_\_\_ day \_\_\_\_ end.

When \_\_\_\_ have \_\_\_\_ end?

\_\_\_\_ when my coverage \_\_\_\_ come to \_\_\_\_ end.

Is \_\_\_\_ coverage \_\_\_\_ a \_\_\_\_?

Do \_\_\_\_ have \_\_\_\_ the \_\_\_\_ of \_\_\_\_ policy?

I \_\_\_\_ when \_\_\_\_ lose \_\_\_\_ coverage.

What \_\_\_\_ the day \_\_\_\_ of \_\_\_\_ insurance becomes \_\_\_\_?

\_\_\_\_ point \_\_\_\_ is my \_\_\_\_ away?

Can you tell \_\_\_\_ being covered?

\_\_\_\_ you tell \_\_\_\_ when \_\_\_\_ longer \_\_\_\_?

\_\_\_\_ is my \_\_\_\_ ending?

\_\_\_\_ ending date for your \_\_\_\_ services to me?

\_\_\_\_ know \_\_\_\_ precise \_\_\_\_ date for canceling your insurance \_\_\_\_.

I \_\_\_\_\_ if you \_\_\_\_\_ decided an effective \_\_\_\_\_ for \_\_\_\_\_ policy.  
\_\_\_\_\_ coverage date?  
\_\_\_\_\_ the \_\_\_\_\_ for my insurance?  
\_\_\_\_\_ give me the ending \_\_\_\_\_ of \_\_\_\_\_?  
\_\_\_\_\_ want to know when \_\_\_\_\_.  
Let me know when \_\_\_\_\_.  
\_\_\_\_\_ me know \_\_\_\_\_ will end  
\_\_\_\_\_ tell me \_\_\_\_\_ insurance coverage \_\_\_\_\_ end?  
I \_\_\_\_\_ appreciate \_\_\_\_\_ could \_\_\_\_\_ know \_\_\_\_\_ my \_\_\_\_\_ will end.  
\_\_\_\_\_ date \_\_\_\_\_ discontinued insurance  
What is \_\_\_\_\_ day \_\_\_\_\_ am \_\_\_\_\_ insured?  
\_\_\_\_\_ is the \_\_\_\_\_ lose coverage?  
I \_\_\_\_\_ at \_\_\_\_\_ point \_\_\_\_\_ insurance \_\_\_\_\_.  
\_\_\_\_\_ day are \_\_\_\_\_ not \_\_\_\_\_?  
I would \_\_\_\_\_ end date for \_\_\_\_\_ my insurance.  
What \_\_\_\_\_ has my \_\_\_\_\_?  
Can \_\_\_\_\_ the date \_\_\_\_\_ my \_\_\_\_\_ of \_\_\_\_\_?  
What \_\_\_\_\_ the \_\_\_\_\_ my \_\_\_\_\_ plan?  
\_\_\_\_\_ the cancellation \_\_\_\_\_ of \_\_\_\_\_ policy?  
\_\_\_\_\_ the coverage \_\_\_\_\_?  
\_\_\_\_\_ date is \_\_\_\_\_?  
What \_\_\_\_\_ date for cutting \_\_\_\_\_ my \_\_\_\_\_?  
My \_\_\_\_\_ will \_\_\_\_\_ point?  
\_\_\_\_\_ let \_\_\_\_\_ know when \_\_\_\_\_ policy \_\_\_\_\_.  
I need \_\_\_\_\_ know the \_\_\_\_\_ end \_\_\_\_\_ canceling \_\_\_\_\_.  
What is the \_\_\_\_\_ my \_\_\_\_\_?  
\_\_\_\_\_ would \_\_\_\_\_ to know when \_\_\_\_\_ insurance \_\_\_\_\_ be \_\_\_\_\_ canceled.  
I would like \_\_\_\_\_ the exact ending \_\_\_\_\_ canceled \_\_\_\_\_.  
\_\_\_\_\_ know \_\_\_\_\_ my \_\_\_\_\_ will end?  
What date \_\_\_\_\_ coverage \_\_\_\_\_?  
Have \_\_\_\_\_ an \_\_\_\_\_ date \_\_\_\_\_ my policy to \_\_\_\_\_?  
When \_\_\_\_\_ coverage \_\_\_\_\_?  
What \_\_\_\_\_ effective date \_\_\_\_\_ my \_\_\_\_\_?  
What \_\_\_\_\_ date when \_\_\_\_\_ lose my coverage?  
Can \_\_\_\_\_ tell \_\_\_\_\_ when the \_\_\_\_\_ be \_\_\_\_\_?  
\_\_\_\_\_ the effective terminates date \_\_\_\_\_?  
\_\_\_\_\_ is ending?  
\_\_\_\_\_ the date \_\_\_\_\_ can stop my \_\_\_\_\_?  
When does \_\_\_\_\_ end?  
\_\_\_\_\_ there \_\_\_\_\_ effective termination \_\_\_\_\_ coverage?  
\_\_\_\_\_ you confirm the \_\_\_\_\_ coverage?  
I don't \_\_\_\_\_ the \_\_\_\_\_ I \_\_\_\_\_ being covered.  
The \_\_\_\_\_ date of \_\_\_\_\_  
What \_\_\_\_\_ will \_\_\_\_\_ end \_\_\_\_\_?  
\_\_\_\_\_ effective date when my \_\_\_\_\_ is \_\_\_\_\_?  
Details \_\_\_\_\_ insurance coverage?  
\_\_\_\_\_ day \_\_\_\_\_ my insurance \_\_\_\_\_?  
\_\_\_\_\_ you say \_\_\_\_\_ plan \_\_\_\_\_.  
What \_\_\_\_\_ my coverage \_\_\_\_\_?  
What \_\_\_\_\_ effective \_\_\_\_\_ my \_\_\_\_\_ cancellation?

I lost \_\_\_\_ on \_\_\_\_ ?  
\_\_\_\_ will I no \_\_\_\_ coverage?  
Are \_\_\_\_ able \_\_\_\_ me \_\_\_\_ I stopped \_\_\_\_ covered?  
When is \_\_\_\_ ?  
\_\_\_\_ Effective \_\_\_\_ of \_\_\_\_ End?  
Can you \_\_\_\_ my \_\_\_\_ ends?  
\_\_\_\_ want \_\_\_\_ know when I'm \_\_\_\_ longer \_\_\_\_ .  
Tell \_\_\_\_ when \_\_\_\_ coverage \_\_\_\_ to \_\_\_\_ .  
Can you let me \_\_\_\_ precise \_\_\_\_ date \_\_\_\_ services?  
When \_\_\_\_ my \_\_\_\_ end??  
\_\_\_\_ when my \_\_\_\_ will be \_\_\_\_ ?  
What \_\_\_\_ I \_\_\_\_ being \_\_\_\_ ?  
When \_\_\_\_ will \_\_\_\_ coverage?  
\_\_\_\_ don't \_\_\_\_ when \_\_\_\_ will no \_\_\_\_ have \_\_\_\_ .  
Can you say \_\_\_\_ my \_\_\_\_ ?  
\_\_\_\_ like \_\_\_\_ know \_\_\_\_ ending date for \_\_\_\_ insurance services.  
\_\_\_\_ is the point \_\_\_\_ insurance \_\_\_\_ ?  
\_\_\_\_ to \_\_\_\_ when I'll lose \_\_\_\_ .  
When \_\_\_\_ cancellation \_\_\_\_ my \_\_\_\_ be?  
\_\_\_\_ my insurance \_\_\_\_ ?  
\_\_\_\_ can \_\_\_\_ stop \_\_\_\_ ?  
I \_\_\_\_ to \_\_\_\_ the \_\_\_\_ canceling my insurance services.  
\_\_\_\_ insurance \_\_\_\_ what date?  
\_\_\_\_ of the policy cancellation?  
Can you \_\_\_\_ about the \_\_\_\_ my coverage?  
\_\_\_\_ my coverage \_\_\_\_ down?  
I'm wondering when \_\_\_\_ .  
\_\_\_\_ my coverage \_\_\_\_ ?  
The \_\_\_\_ health plan.  
What \_\_\_\_ the exact \_\_\_\_ that \_\_\_\_ policy \_\_\_\_ ?  
\_\_\_\_ like to \_\_\_\_ my \_\_\_\_ ends.  
Do \_\_\_\_ when \_\_\_\_ insurance \_\_\_\_ finished?  
\_\_\_\_ this \_\_\_\_ be stopped?  
\_\_\_\_ there any \_\_\_\_ about \_\_\_\_ my insurance?  
\_\_\_\_ are I \_\_\_\_ longer covered?  
\_\_\_\_ would \_\_\_\_ canceled?  
\_\_\_\_ possible that \_\_\_\_ can confirm when my \_\_\_\_ ?  
I want to \_\_\_\_ when \_\_\_\_ .  
I need to know \_\_\_\_ longer \_\_\_\_ .  
\_\_\_\_ would like \_\_\_\_ when my \_\_\_\_ .  
Do you \_\_\_\_ day \_\_\_\_ covered?  
\_\_\_\_ is the \_\_\_\_ that my policy \_\_\_\_ ?  
\_\_\_\_ the \_\_\_\_ my coverage due \_\_\_\_ happen?  
I \_\_\_\_ know \_\_\_\_ cancel day \_\_\_\_ .  
\_\_\_\_ is my coverage \_\_\_\_ ?  
\_\_\_\_ is \_\_\_\_ date \_\_\_\_ stop being \_\_\_\_ ?  
\_\_\_\_ policy cancellation day?  
\_\_\_\_ did \_\_\_\_ having my \_\_\_\_ ?  
Are you \_\_\_\_ my \_\_\_\_ end?  
\_\_\_\_ like to know \_\_\_\_ date for \_\_\_\_ my insurance \_\_\_\_ .

\_\_\_\_\_ is \_\_\_\_\_ end of \_\_\_\_\_?  
 \_\_\_\_\_ you \_\_\_\_\_ me \_\_\_\_\_ I'll lose my \_\_\_\_\_ coverage?  
 At what point in \_\_\_\_\_ is \_\_\_\_\_?  
 I \_\_\_\_\_ know \_\_\_\_\_ my \_\_\_\_\_ ends.  
 \_\_\_\_\_ you tell \_\_\_\_\_ the \_\_\_\_\_ that my \_\_\_\_\_?  
 \_\_\_\_\_ is \_\_\_\_\_ effective date for \_\_\_\_\_?  
 The \_\_\_\_\_ for \_\_\_\_\_ coverage \_\_\_\_\_ not known.  
 \_\_\_\_\_ terminated date for my \_\_\_\_\_?  
 \_\_\_\_\_ you \_\_\_\_\_ I \_\_\_\_\_ being covered?  
 \_\_\_\_\_ is the \_\_\_\_\_ I terminated \_\_\_\_\_ coverage?  
 When \_\_\_\_\_ insurance \_\_\_\_\_?  
 I need \_\_\_\_\_ I \_\_\_\_\_ covered.  
 When \_\_\_\_\_ the \_\_\_\_\_ be \_\_\_\_\_?  
 \_\_\_\_\_ day \_\_\_\_\_ my insurance \_\_\_\_\_ becomes \_\_\_\_\_?  
 When \_\_\_\_\_ stop?  
 \_\_\_\_\_ date does \_\_\_\_\_ my \_\_\_\_\_?  
 \_\_\_\_\_ is the \_\_\_\_\_ for \_\_\_\_\_ policy  
 What date \_\_\_\_\_ of \_\_\_\_\_ health \_\_\_\_\_?  
 Can \_\_\_\_\_ when \_\_\_\_\_ stop \_\_\_\_\_ covered?  
 Please \_\_\_\_\_ the \_\_\_\_\_ lose coverage.  
 \_\_\_\_\_ ends becomes effective?  
 \_\_\_\_\_ my \_\_\_\_\_ ends?  
 Can \_\_\_\_\_ a time \_\_\_\_\_ I \_\_\_\_\_ be covered?  
 \_\_\_\_\_ you \_\_\_\_\_ I \_\_\_\_\_ being covered?  
 What is \_\_\_\_\_ effective \_\_\_\_\_ last day \_\_\_\_\_ coverage?  
 \_\_\_\_\_ coverage ending \_\_\_\_\_ effect?  
 \_\_\_\_\_ of coverage \_\_\_\_\_?  
 What day will I \_\_\_\_\_?  
 \_\_\_\_\_ there a \_\_\_\_\_ effective \_\_\_\_\_ the end \_\_\_\_\_ my \_\_\_\_\_ yet?  
 I \_\_\_\_\_ to know \_\_\_\_\_ end \_\_\_\_\_ for \_\_\_\_\_ coverage.  
 I \_\_\_\_\_ to know \_\_\_\_\_ stopped.  
 \_\_\_\_\_ is the \_\_\_\_\_ in time \_\_\_\_\_ terminates?  
 What's \_\_\_\_\_ cancellation \_\_\_\_\_ for my \_\_\_\_\_?  
 What day will \_\_\_\_\_ end of \_\_\_\_\_?  
 \_\_\_\_\_ when I'll \_\_\_\_\_ coverage  
 \_\_\_\_\_ the end \_\_\_\_\_ of \_\_\_\_\_ coverage?  
 \_\_\_\_\_ I \_\_\_\_\_ covering?  
 \_\_\_\_\_ my insurance terminates becomes \_\_\_\_\_.  
 \_\_\_\_\_ date \_\_\_\_\_ I going \_\_\_\_\_ lose \_\_\_\_\_?  
 Is the \_\_\_\_\_ particular date?  
 \_\_\_\_\_ when my plan \_\_\_\_\_?  
 Can \_\_\_\_\_ when my coverage ends?  
 Can you tell me the \_\_\_\_\_ ending \_\_\_\_\_ canceling \_\_\_\_\_?  
 \_\_\_\_\_ need \_\_\_\_\_ when \_\_\_\_\_ will lose my insurance \_\_\_\_\_.  
 What day has \_\_\_\_\_ ceased \_\_\_\_\_?  
 Do you \_\_\_\_\_ coverage date \_\_\_\_\_?  
 Is \_\_\_\_\_ day set?  
 \_\_\_\_\_ is \_\_\_\_\_ end \_\_\_\_\_ healthcare plan?  
 Can you \_\_\_\_\_ the cancellation \_\_\_\_\_ place?  
 \_\_\_\_\_ date \_\_\_\_\_ coverage end.

When do \_\_\_\_\_ my \_\_\_\_\_?

When coverage \_\_\_\_\_?

\_\_\_\_\_ the \_\_\_\_\_ cancelled?

\_\_\_\_\_ no longer covered \_\_\_\_\_?

\_\_\_\_\_ for \_\_\_\_\_ the terminated date.

\_\_\_\_\_ point do \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ does the \_\_\_\_\_ termination \_\_\_\_\_?

Is \_\_\_\_\_ set to \_\_\_\_\_?

\_\_\_\_\_ me know when the \_\_\_\_\_.

\_\_\_\_\_ what \_\_\_\_\_ will insurance \_\_\_\_\_?

\_\_\_\_\_ you \_\_\_\_\_ regarding the cessation \_\_\_\_\_ my policy's \_\_\_\_\_?

\_\_\_\_\_ for information on \_\_\_\_\_ coverage will stop.

I'm \_\_\_\_\_ for \_\_\_\_\_ about \_\_\_\_\_ date.

When \_\_\_\_\_ finish?

Please provide \_\_\_\_\_ end of \_\_\_\_\_ insurance.

When \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ know what's happening with \_\_\_\_\_ to \_\_\_\_\_ I'll \_\_\_\_\_ the Coverage \_\_\_\_\_ the \_\_\_\_\_.

May I \_\_\_\_\_ termination \_\_\_\_\_?

\_\_\_\_\_ tell me \_\_\_\_\_ no longer being \_\_\_\_\_?

\_\_\_\_\_ does my \_\_\_\_\_ away?

Can \_\_\_\_\_ tell me \_\_\_\_\_ cancellation?

The effective \_\_\_\_\_ ending?

When does \_\_\_\_\_ to \_\_\_\_\_ halt?

I don't \_\_\_\_\_ when \_\_\_\_\_ can no \_\_\_\_\_.

Please \_\_\_\_\_ me \_\_\_\_\_ my \_\_\_\_\_ ends.

\_\_\_\_\_ does \_\_\_\_\_ end \_\_\_\_\_ insurance become \_\_\_\_\_?

\_\_\_\_\_ exact \_\_\_\_\_ my policy's \_\_\_\_\_ is not \_\_\_\_\_.

Let me \_\_\_\_\_ when \_\_\_\_\_

Can \_\_\_\_\_ me the \_\_\_\_\_ my \_\_\_\_\_ ends?

At \_\_\_\_\_ will my \_\_\_\_\_?

\_\_\_\_\_ the end \_\_\_\_\_ health insurance \_\_\_\_\_?

Which \_\_\_\_\_ the cancellation \_\_\_\_\_ policy?

Can \_\_\_\_\_ give me the \_\_\_\_\_ covered?

\_\_\_\_\_ point does my \_\_\_\_\_?

Do you \_\_\_\_\_ cessation \_\_\_\_\_ my policy's effectiveness?

What \_\_\_\_\_ I lose \_\_\_\_\_?

\_\_\_\_\_ to \_\_\_\_\_ when I will \_\_\_\_\_ longer \_\_\_\_\_ covered.

Is \_\_\_\_\_ a \_\_\_\_\_ my \_\_\_\_\_ will be \_\_\_\_\_?

when will \_\_\_\_\_?

What \_\_\_\_\_ does \_\_\_\_\_ stop?

\_\_\_\_\_ my \_\_\_\_\_ Terminations \_\_\_\_\_ effect?

\_\_\_\_\_ should I \_\_\_\_\_ to \_\_\_\_\_ my \_\_\_\_\_?

Is the \_\_\_\_\_ date for \_\_\_\_\_?

\_\_\_\_\_ was \_\_\_\_\_ my policy \_\_\_\_\_ is.

\_\_\_\_\_ tell me when my \_\_\_\_\_ is \_\_\_\_\_.

\_\_\_\_\_ the effective \_\_\_\_\_ of my \_\_\_\_\_?

\_\_\_\_\_ the effective date \_\_\_\_\_ my \_\_\_\_\_?

At what \_\_\_\_\_ is \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ my \_\_\_\_\_ stopped?

When \_\_\_\_\_ coverage \_\_\_\_\_?

Do \_\_\_\_\_ the end of my \_\_\_\_\_ effectiveness?  
What day do \_\_\_\_\_?  
What is the \_\_\_\_\_ date for \_\_\_\_\_?  
When \_\_\_\_\_ policy \_\_\_\_\_?  
Did \_\_\_\_\_ when I \_\_\_\_\_ insurance \_\_\_\_\_?  
\_\_\_\_\_ is the end \_\_\_\_\_ occurring?  
\_\_\_\_\_ shall \_\_\_\_\_ happen?  
\_\_\_\_\_ the \_\_\_\_\_ my coverage terminates?  
What \_\_\_\_\_ the \_\_\_\_\_ healthcare plan.  
\_\_\_\_\_ to \_\_\_\_\_ the effective \_\_\_\_\_ is for ending \_\_\_\_\_ coverage.  
\_\_\_\_\_ the end date \_\_\_\_\_ plan?  
Do \_\_\_\_\_ will be terminated?  
What \_\_\_\_\_ to lose coverage?  
Cancelling \_\_\_\_\_ on \_\_\_\_\_?  
Do \_\_\_\_\_ coverage will stop?  
What \_\_\_\_\_ I been removed \_\_\_\_\_?  
\_\_\_\_\_ point \_\_\_\_\_ my \_\_\_\_\_ cease?  
\_\_\_\_\_ the date \_\_\_\_\_ get no \_\_\_\_\_?  
\_\_\_\_\_ the date when \_\_\_\_\_ can \_\_\_\_\_ coverage?  
Let \_\_\_\_\_ when \_\_\_\_\_ will end.  
\_\_\_\_\_ is \_\_\_\_\_ exact date \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_ canceled?  
\_\_\_\_\_ me \_\_\_\_\_ the \_\_\_\_\_ I'll \_\_\_\_\_ coverage.  
\_\_\_\_\_ give \_\_\_\_\_ date for \_\_\_\_\_ insurance \_\_\_\_\_.  
Have you \_\_\_\_\_ specific effective \_\_\_\_\_ ending \_\_\_\_\_ policy?  
\_\_\_\_\_ I \_\_\_\_\_ the coverage?  
\_\_\_\_\_ you \_\_\_\_\_ me when \_\_\_\_\_ ends for \_\_\_\_\_?  
What \_\_\_\_\_ my \_\_\_\_\_ away?  
When \_\_\_\_\_ your \_\_\_\_\_?  
What is \_\_\_\_\_ date \_\_\_\_\_ interruption \_\_\_\_\_ coverage?  
\_\_\_\_\_ does my insurance \_\_\_\_\_?  
\_\_\_\_\_ there \_\_\_\_\_ specific \_\_\_\_\_ for \_\_\_\_\_ of my policy?  
\_\_\_\_\_ you know the \_\_\_\_\_ date \_\_\_\_\_ canceling insurance \_\_\_\_\_?  
Tell me \_\_\_\_\_ I \_\_\_\_\_.  
\_\_\_\_\_ when I stop \_\_\_\_\_ covered.  
Did you \_\_\_\_\_ an \_\_\_\_\_ date for \_\_\_\_\_ end \_\_\_\_\_?  
\_\_\_\_\_ I'll lose \_\_\_\_\_ coverage?  
\_\_\_\_\_ you know \_\_\_\_\_ plan \_\_\_\_\_?  
When is the cancellation \_\_\_\_\_ coverage \_\_\_\_\_ to \_\_\_\_\_?  
My policy \_\_\_\_\_ day \_\_\_\_\_ not \_\_\_\_\_.  
When \_\_\_\_\_ my \_\_\_\_\_?  
\_\_\_\_\_ date for ending my coverage?  
\_\_\_\_\_ my policy cancellation \_\_\_\_\_?  
My \_\_\_\_\_ at \_\_\_\_\_ point.  
\_\_\_\_\_ give a \_\_\_\_\_ dropping \_\_\_\_\_.  
Can \_\_\_\_\_ tell \_\_\_\_\_ stop covering me?  
I am \_\_\_\_\_ cancellation \_\_\_\_\_ will be.  
When \_\_\_\_\_ end?  
Can \_\_\_\_\_ when \_\_\_\_\_ stop having \_\_\_\_\_?  
Do \_\_\_\_\_ have any information \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_?  
I \_\_\_\_\_ exact end date for \_\_\_\_\_ your insurance \_\_\_\_\_.

Did \_\_\_\_ find \_\_\_\_ effective date \_\_\_\_ ending my \_\_\_\_?

\_\_\_\_ is \_\_\_\_ day when I \_\_\_\_?

When does \_\_\_\_ effect?

I don't \_\_\_\_ coverage expires.

\_\_\_\_ coverage \_\_\_\_ stop please let \_\_\_\_.

I'll lose \_\_\_\_ coverage \_\_\_\_ tell me the \_\_\_\_.

\_\_\_\_ my coverage \_\_\_\_?

Have you \_\_\_\_ when \_\_\_\_?

What \_\_\_\_ have \_\_\_\_ coverage?

What \_\_\_\_ the date \_\_\_\_ my \_\_\_\_?

What \_\_\_\_ the effective \_\_\_\_ ending \_\_\_\_?

What is \_\_\_\_ the \_\_\_\_ coverage?

I am \_\_\_\_ precise \_\_\_\_ date \_\_\_\_ canceling your \_\_\_\_ services.

Please \_\_\_\_ a \_\_\_\_ when the \_\_\_\_ will \_\_\_\_.

What \_\_\_\_ do \_\_\_\_ being \_\_\_\_?

\_\_\_\_ would \_\_\_\_ to \_\_\_\_ exact ending \_\_\_\_ for canceling \_\_\_\_ services.

\_\_\_\_ day \_\_\_\_ I no \_\_\_\_?

I do \_\_\_\_ know the \_\_\_\_ date for \_\_\_\_.

\_\_\_\_ aware when my coverage \_\_\_\_?

\_\_\_\_ wonder \_\_\_\_ cancellation day is?

I \_\_\_\_ not know \_\_\_\_ coverage \_\_\_\_.

The date when \_\_\_\_ will \_\_\_\_?

\_\_\_\_ is the End \_\_\_\_?

\_\_\_\_ date that \_\_\_\_ ends.

\_\_\_\_ am wondering \_\_\_\_ policy \_\_\_\_ day \_\_\_\_.

\_\_\_\_ point \_\_\_\_ my insurance \_\_\_\_?

\_\_\_\_ would appreciate it \_\_\_\_ could \_\_\_\_ me when my \_\_\_\_.

\_\_\_\_ does \_\_\_\_ stop?

Can you tell \_\_\_\_ I \_\_\_\_?

\_\_\_\_ would \_\_\_\_ to \_\_\_\_ date that \_\_\_\_ stop \_\_\_\_ covered.

\_\_\_\_ I know the effective \_\_\_\_ date \_\_\_\_?

Please provide a date \_\_\_\_.

\_\_\_\_ my \_\_\_\_ stopped?

\_\_\_\_ in \_\_\_\_ is my \_\_\_\_ going away?

\_\_\_\_ was the \_\_\_\_ of \_\_\_\_?

\_\_\_\_ can I expect \_\_\_\_ end?

\_\_\_\_ do \_\_\_\_ come to \_\_\_\_ end?

Can \_\_\_\_ tell \_\_\_\_ stopped \_\_\_\_ covered?

\_\_\_\_ me to know \_\_\_\_ my \_\_\_\_.

When \_\_\_\_ my coverage \_\_\_\_?

\_\_\_\_ the cancellation \_\_\_\_ effect?

\_\_\_\_ cessation \_\_\_\_ of \_\_\_\_ healthcare plan?

What's the \_\_\_\_ ends?

\_\_\_\_ known when my \_\_\_\_ is \_\_\_\_?

What \_\_\_\_ date \_\_\_\_ will end?

The \_\_\_\_ end \_\_\_\_ my coverage \_\_\_\_ not \_\_\_\_.

\_\_\_\_ is \_\_\_\_ cancellation \_\_\_\_ for my \_\_\_\_?

\_\_\_\_ is \_\_\_\_ cancellation of \_\_\_\_ supposed \_\_\_\_ happen?

\_\_\_\_ is \_\_\_\_ when I lose \_\_\_\_ insurance?

\_\_\_\_ tell me \_\_\_\_ ending \_\_\_\_ canceling your insurance \_\_\_\_.

\_\_\_\_\_ tell me \_\_\_\_\_ have no more coverage?

\_\_\_\_\_ my insurance expires?

\_\_\_\_\_ day have I \_\_\_\_\_ to \_\_\_\_\_?

\_\_\_\_\_ will my coverage come \_\_\_\_\_?

\_\_\_\_\_ has I \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ soon does \_\_\_\_\_ insurance become effective?

When \_\_\_\_\_ was \_\_\_\_\_?

I'm wondering \_\_\_\_\_ I \_\_\_\_\_.

\_\_\_\_\_ am \_\_\_\_\_ if you have determined an \_\_\_\_\_ date \_\_\_\_\_.

The \_\_\_\_\_ of \_\_\_\_\_ policy's \_\_\_\_\_?

\_\_\_\_\_ the date that \_\_\_\_\_ will \_\_\_\_\_ coverage?

What \_\_\_\_\_ the \_\_\_\_\_ coverage \_\_\_\_\_?

Tell \_\_\_\_\_ I'll lose coverage.

Can \_\_\_\_\_ tell \_\_\_\_\_ date of my \_\_\_\_\_?

\_\_\_\_\_ give \_\_\_\_\_ date for \_\_\_\_\_.

\_\_\_\_\_ don't \_\_\_\_\_ I lose coverage.

\_\_\_\_\_ want to know \_\_\_\_\_ confirm \_\_\_\_\_ my \_\_\_\_\_ ends.

Was \_\_\_\_\_ effective date \_\_\_\_\_?

what day do \_\_\_\_\_?

\_\_\_\_\_ me \_\_\_\_\_ my plan ends?

\_\_\_\_\_ no longer covered?

\_\_\_\_\_ my coverage \_\_\_\_\_

\_\_\_\_\_ will \_\_\_\_\_ end?

\_\_\_\_\_ know when \_\_\_\_\_ have no more coverage.

The day when \_\_\_\_\_ ends \_\_\_\_\_?

Please \_\_\_\_\_ date for \_\_\_\_\_ stopped.

\_\_\_\_\_ plan ends?

\_\_\_\_\_ is the \_\_\_\_\_ date when I \_\_\_\_\_ my \_\_\_\_\_?

I'll \_\_\_\_\_ my coverage on \_\_\_\_\_.

\_\_\_\_\_ you know when my \_\_\_\_\_ to \_\_\_\_\_?

What is the \_\_\_\_\_ the \_\_\_\_\_?

When \_\_\_\_\_ stop?

Tell \_\_\_\_\_ day I \_\_\_\_\_ covered.

What \_\_\_\_\_ the firing \_\_\_\_\_ my insurance \_\_\_\_\_?

\_\_\_\_\_ expect \_\_\_\_\_ get rid \_\_\_\_\_ my insurance?

\_\_\_\_\_ know the \_\_\_\_\_ termination date for \_\_\_\_\_?

On \_\_\_\_\_ day \_\_\_\_\_ be \_\_\_\_\_?

\_\_\_\_\_ I stop being \_\_\_\_\_?

\_\_\_\_\_ you \_\_\_\_\_ when \_\_\_\_\_ coverage \_\_\_\_\_ end?

\_\_\_\_\_ effective terminated \_\_\_\_\_ for \_\_\_\_\_ unknown.

Do you \_\_\_\_\_ information on the \_\_\_\_\_ of \_\_\_\_\_?

Tell \_\_\_\_\_ about \_\_\_\_\_ will \_\_\_\_\_ insurance \_\_\_\_\_.

\_\_\_\_\_ my coverage \_\_\_\_\_ be?

\_\_\_\_\_ date did \_\_\_\_\_ lose \_\_\_\_\_?

\_\_\_\_\_ will \_\_\_\_\_ the end \_\_\_\_\_ coverage?

\_\_\_\_\_ know the \_\_\_\_\_ ending \_\_\_\_\_ for canceling your \_\_\_\_\_?

Is the \_\_\_\_\_ date \_\_\_\_\_ for \_\_\_\_\_ my \_\_\_\_\_?

You \_\_\_\_\_ any \_\_\_\_\_ about \_\_\_\_\_ of my policy's \_\_\_\_\_?

\_\_\_\_\_ date \_\_\_\_\_ the coverage \_\_\_\_\_?

\_\_\_\_\_ want \_\_\_\_\_ know \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_.



What's \_\_\_\_ effective \_\_\_\_ for \_\_\_\_ coverage \_\_\_\_?  
\_\_\_\_ it \_\_\_\_ to \_\_\_\_ specific effective \_\_\_\_ for \_\_\_\_ my policy?  
The \_\_\_\_ coverage \_\_\_\_?  
Let me know \_\_\_\_\_.  
\_\_\_\_ does \_\_\_\_ insurance occur?  
\_\_\_\_ the coverage will end?  
\_\_\_\_ is \_\_\_\_ insurance \_\_\_\_?  
Is \_\_\_\_ an \_\_\_\_ date \_\_\_\_ end \_\_\_\_ my coverage?  
What \_\_\_\_ day \_\_\_\_ my \_\_\_\_ cancellation?  
\_\_\_\_ me know \_\_\_\_ my \_\_\_\_  
When \_\_\_\_ the \_\_\_\_ of \_\_\_\_ insurance \_\_\_\_?  
I want to \_\_\_\_ my coverage \_\_\_\_ longer \_\_\_\_.  
What \_\_\_\_ time when \_\_\_\_ no \_\_\_\_ coverage?  
\_\_\_\_ is \_\_\_\_ date \_\_\_\_ which I can \_\_\_\_ coverage?  
\_\_\_\_ my coverage going \_\_\_\_ stop?  
When will \_\_\_\_ coverage?  
\_\_\_\_ would \_\_\_\_ the end \_\_\_\_ coverage?  
\_\_\_\_ I want to end my \_\_\_\_ effective \_\_\_\_?  
What \_\_\_\_ the \_\_\_\_ for my \_\_\_\_ date?  
\_\_\_\_ of \_\_\_\_ effective \_\_\_\_ for ending my policy?  
\_\_\_\_ a date for \_\_\_\_.  
\_\_\_\_ give a \_\_\_\_ insurance.  
What \_\_\_\_ coverage over?  
\_\_\_\_ the \_\_\_\_ that I lose \_\_\_\_?  
When \_\_\_\_ expect \_\_\_\_ lose \_\_\_\_?  
\_\_\_\_ was \_\_\_\_ axed?  
\_\_\_\_ know when my insurance \_\_\_\_.  
\_\_\_\_ determined an effective date \_\_\_\_ policy?  
What is the \_\_\_\_ my insurance \_\_\_\_ be \_\_\_\_?  
Let \_\_\_\_ when my \_\_\_\_ going \_\_\_\_ end  
\_\_\_\_ effective \_\_\_\_ for coverage \_\_\_\_?  
\_\_\_\_ the \_\_\_\_ insurance date.  
\_\_\_\_ me when \_\_\_\_ coverage \_\_\_\_ lost.  
Do \_\_\_\_ know when \_\_\_\_ coverage \_\_\_\_?  
Is the \_\_\_\_ date for \_\_\_\_?  
\_\_\_\_ the date \_\_\_\_ stop \_\_\_\_ coverage?  
\_\_\_\_ know the \_\_\_\_ date for canceling your insurance \_\_\_\_.  
\_\_\_\_ say when the \_\_\_\_?  
What when \_\_\_\_ end?  
\_\_\_\_ when \_\_\_\_ coverage is set to end.  
\_\_\_\_ my coverage cut \_\_\_\_?  
\_\_\_\_ stop getting coverage?  
\_\_\_\_ let me know \_\_\_\_ ends.  
\_\_\_\_ I \_\_\_\_ coverage?  
\_\_\_\_ will my \_\_\_\_ finished?  
\_\_\_\_ specific effective \_\_\_\_ for dissolving \_\_\_\_ policy yet?  
\_\_\_\_ when coverage \_\_\_\_ taken away.  
I \_\_\_\_ know when my health \_\_\_\_ terminated.  
\_\_\_\_ wondering when \_\_\_\_ ends.  
\_\_\_\_ me \_\_\_\_ your \_\_\_\_ services will end?

\_\_\_\_\_ does \_\_\_\_\_ leave \_\_\_\_\_ effect?

\_\_\_\_\_ coverage be finished?

\_\_\_\_\_ is the date of \_\_\_\_\_ of \_\_\_\_\_?

When coverage \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ coverage \_\_\_\_\_?

\_\_\_\_\_ is the \_\_\_\_\_ policy's \_\_\_\_\_?

\_\_\_\_\_ can I \_\_\_\_\_ to \_\_\_\_\_ longer \_\_\_\_\_?

Do you \_\_\_\_\_ when \_\_\_\_\_ is going \_\_\_\_\_ finished?

\_\_\_\_\_ the \_\_\_\_\_ for \_\_\_\_\_ of insurance.

Do \_\_\_\_\_ on \_\_\_\_\_ specific date?

\_\_\_\_\_ want \_\_\_\_\_ know \_\_\_\_\_ my \_\_\_\_\_ finished.

\_\_\_\_\_ is \_\_\_\_\_ when I lose \_\_\_\_\_?

\_\_\_\_\_ does \_\_\_\_\_ coverageEnd?

When \_\_\_\_\_ I \_\_\_\_\_ my \_\_\_\_\_?

When \_\_\_\_\_ my \_\_\_\_\_ be \_\_\_\_\_?

After what day do \_\_\_\_\_?

\_\_\_\_\_ date I'll lose my \_\_\_\_\_.

Can you \_\_\_\_\_ I stopped \_\_\_\_\_?

tell me when \_\_\_\_\_.

Do \_\_\_\_\_ specific effective date \_\_\_\_\_ to end my \_\_\_\_\_?

When should I \_\_\_\_\_ stop \_\_\_\_\_?

\_\_\_\_\_ I able \_\_\_\_\_ stop my \_\_\_\_\_?

\_\_\_\_\_ the date \_\_\_\_\_ my \_\_\_\_\_ day?

\_\_\_\_\_ my plan ends?

What time \_\_\_\_\_ it \_\_\_\_\_ will be \_\_\_\_\_?

\_\_\_\_\_ date is \_\_\_\_\_ coverage \_\_\_\_\_?

What \_\_\_\_\_ the \_\_\_\_\_ my \_\_\_\_\_ plan

I don't \_\_\_\_\_ coverage goes into effect.

I need \_\_\_\_\_ know when \_\_\_\_\_ insurance \_\_\_\_\_.

I would like \_\_\_\_\_ know when \_\_\_\_\_ should \_\_\_\_\_ to \_\_\_\_\_.

\_\_\_\_\_ you know when my \_\_\_\_\_?

Is \_\_\_\_\_ date for \_\_\_\_\_ my policy?

I \_\_\_\_\_ know \_\_\_\_\_ the effective \_\_\_\_\_ is \_\_\_\_\_ ending \_\_\_\_\_ coverage.

When \_\_\_\_\_ ending.

The \_\_\_\_\_ coverage \_\_\_\_\_?

What \_\_\_\_\_ my health \_\_\_\_\_?

So after what \_\_\_\_\_ do \_\_\_\_\_ longer \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ to \_\_\_\_\_ health insurance?

When can I \_\_\_\_\_?

Please provide a \_\_\_\_\_ of \_\_\_\_\_.

\_\_\_\_\_ will I \_\_\_\_\_ coverage \_\_\_\_\_?

\_\_\_\_\_ a \_\_\_\_\_ effective date for \_\_\_\_\_ being terminated?

\_\_\_\_\_ just \_\_\_\_\_ to know \_\_\_\_\_ I \_\_\_\_\_ covered.

I want to \_\_\_\_\_ cease.

\_\_\_\_\_ you aware \_\_\_\_\_ will finish?

\_\_\_\_\_ my coverage going \_\_\_\_\_?

I want \_\_\_\_\_ if \_\_\_\_\_ information \_\_\_\_\_ the cessation \_\_\_\_\_ my \_\_\_\_\_ effectiveness.

When \_\_\_\_\_ coverage \_\_\_\_\_ for \_\_\_\_\_?

\_\_\_\_\_ don't \_\_\_\_\_ date \_\_\_\_\_ will end.

\_\_\_\_\_ will my \_\_\_\_\_ on?

\_\_\_\_ you tell me \_\_\_\_ \_\_\_\_ ?  
 \_\_\_\_ you able \_\_\_\_ confirm \_\_\_\_ \_\_\_\_ date?  
 \_\_\_\_ me \_\_\_\_ the \_\_\_\_ that I'll \_\_\_\_ .  
 What day does \_\_\_\_ cancellation \_\_\_\_ ?  
 Tell \_\_\_\_ when I \_\_\_\_ longer \_\_\_\_ .  
 What \_\_\_\_ point at \_\_\_\_ ends?  
 \_\_\_\_ will my \_\_\_\_ end?  
 \_\_\_\_ is the effective \_\_\_\_ for \_\_\_\_ ?  
 \_\_\_\_ know \_\_\_\_ I \_\_\_\_ no longer \_\_\_\_ covered.  
 \_\_\_\_ date \_\_\_\_ I \_\_\_\_ to lose \_\_\_\_ ?  
 \_\_\_\_ does the \_\_\_\_ coverage kick \_\_\_\_ ?  
 Can \_\_\_\_ me when my \_\_\_\_ .  
 I \_\_\_\_ to know \_\_\_\_ precise \_\_\_\_ canceling your \_\_\_\_ .  
 \_\_\_\_ do \_\_\_\_ cancellation \_\_\_\_ coverage take \_\_\_\_ ?  
 Can you \_\_\_\_ when \_\_\_\_ being \_\_\_\_ .  
 When \_\_\_\_ be \_\_\_\_ ?  
 Would \_\_\_\_ me when \_\_\_\_ lose \_\_\_\_ ?  
 What is \_\_\_\_ policy's \_\_\_\_ ?  
 \_\_\_\_ when my insurance \_\_\_\_ effective?  
 Insurance is ending \_\_\_\_ ?  
 \_\_\_\_ I \_\_\_\_ no \_\_\_\_ having coverage?  
 Can you \_\_\_\_ date the \_\_\_\_ ?  
 Have you figured \_\_\_\_ will \_\_\_\_ terminated?  
 Can \_\_\_\_ give \_\_\_\_ end date of \_\_\_\_ ?  
 What is the \_\_\_\_ lose \_\_\_\_ ?  
 When \_\_\_\_ plan \_\_\_\_ confirm?  
 \_\_\_\_ date \_\_\_\_ I stop \_\_\_\_ ?  
 Have \_\_\_\_ determined \_\_\_\_ specific \_\_\_\_ for the \_\_\_\_ my policy?  
 \_\_\_\_ you tell \_\_\_\_ when \_\_\_\_ stop?  
 \_\_\_\_ when \_\_\_\_ will end.  
 \_\_\_\_ is my \_\_\_\_ plan \_\_\_\_ ?  
 Will the coverage \_\_\_\_ ?  
 What day \_\_\_\_ I \_\_\_\_ ?  
 \_\_\_\_ me \_\_\_\_ when I \_\_\_\_ my coverage.  
 \_\_\_\_ day \_\_\_\_ no longer have \_\_\_\_ ?  
 I \_\_\_\_ when my coverage \_\_\_\_ .  
 What \_\_\_\_ the \_\_\_\_ date of \_\_\_\_ ?  
 \_\_\_\_ you \_\_\_\_ the precise ending \_\_\_\_ for \_\_\_\_ my \_\_\_\_ services?  
 \_\_\_\_ does \_\_\_\_ stop?  
 \_\_\_\_ when I'll lose \_\_\_\_ coverage.  
 \_\_\_\_ you tell \_\_\_\_ when \_\_\_\_ ends?  
 \_\_\_\_ time when my insurance \_\_\_\_ ?  
 \_\_\_\_ you \_\_\_\_ date \_\_\_\_ coverage will stop?  
 \_\_\_\_ I \_\_\_\_ the \_\_\_\_ date of \_\_\_\_ ?  
 \_\_\_\_ want to \_\_\_\_ will stop?  
 \_\_\_\_ insurance on which date?  
 When would the \_\_\_\_ insurance \_\_\_\_ ?  
 Is \_\_\_\_ ending \_\_\_\_ on \_\_\_\_ ?  
 I have lost \_\_\_\_ ?  
 Can \_\_\_\_ me when \_\_\_\_ no longer \_\_\_\_ ?

I am \_\_\_\_\_ knowing \_\_\_\_\_ ends.

When will \_\_\_\_\_?

When \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ am I supposed \_\_\_\_\_ plan?

\_\_\_\_\_ my health coverage \_\_\_\_\_ end.

\_\_\_\_\_ wondering when I'll \_\_\_\_\_ insurance \_\_\_\_\_.

\_\_\_\_\_ specific effective date \_\_\_\_\_ my policy?

What \_\_\_\_\_ the effective \_\_\_\_\_ my coverage \_\_\_\_\_ terminated?

\_\_\_\_\_ know the effective \_\_\_\_\_ for my coverage.

When \_\_\_\_\_ my health \_\_\_\_\_?

Can you give \_\_\_\_\_ effective \_\_\_\_\_ for \_\_\_\_\_ policy?

What \_\_\_\_\_ end \_\_\_\_\_ my policy?

\_\_\_\_\_ know when \_\_\_\_\_ insurance will \_\_\_\_\_

\_\_\_\_\_ a specific effective date \_\_\_\_\_ ending \_\_\_\_\_?

\_\_\_\_\_ need \_\_\_\_\_ precise ending date \_\_\_\_\_ canceling your insurance \_\_\_\_\_.

\_\_\_\_\_ date?

\_\_\_\_\_ looking for information \_\_\_\_\_ the \_\_\_\_\_.

The date \_\_\_\_\_ ending?

\_\_\_\_\_ the exact ending \_\_\_\_\_ for canceling your \_\_\_\_\_ services.

\_\_\_\_\_ know \_\_\_\_\_ my coverage will end.

Did \_\_\_\_\_ when I'll \_\_\_\_\_ coverage?

\_\_\_\_\_ I no longer \_\_\_\_\_.

What \_\_\_\_\_ the \_\_\_\_\_ of \_\_\_\_\_ insurance \_\_\_\_\_ effective?

\_\_\_\_\_ when \_\_\_\_\_ my insurance \_\_\_\_\_?

When \_\_\_\_\_ my coverage \_\_\_\_\_?

When do I \_\_\_\_\_ my \_\_\_\_\_?

Is the \_\_\_\_\_ of \_\_\_\_\_ date?

\_\_\_\_\_ day will \_\_\_\_\_ coverage?

What \_\_\_\_\_ time will my \_\_\_\_\_?

\_\_\_\_\_ you determined \_\_\_\_\_ date for my \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ end \_\_\_\_\_ effect?

\_\_\_\_\_ know \_\_\_\_\_ precise end date for \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ don't \_\_\_\_\_ when I \_\_\_\_\_ being covered.

\_\_\_\_\_ I lose \_\_\_\_\_ health \_\_\_\_\_?

\_\_\_\_\_ my plan \_\_\_\_\_?

Can you \_\_\_\_\_ when \_\_\_\_\_ coverage \_\_\_\_\_?

What \_\_\_\_\_ will \_\_\_\_\_ conclude?

So \_\_\_\_\_ did \_\_\_\_\_ coverage \_\_\_\_\_?

When \_\_\_\_\_ should expect \_\_\_\_\_ lose \_\_\_\_\_?

Can \_\_\_\_\_ the effective date \_\_\_\_\_?

\_\_\_\_\_ I expect to lose \_\_\_\_\_?

Can you give \_\_\_\_\_ date for \_\_\_\_\_ your insurance \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ will cease to exist?

\_\_\_\_\_ am \_\_\_\_\_ no \_\_\_\_\_ able to \_\_\_\_\_?

\_\_\_\_\_ insurance come to end?

Which \_\_\_\_\_ I lose \_\_\_\_\_?

Should I know \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_?

\_\_\_\_\_ need \_\_\_\_\_ know when my health \_\_\_\_\_.

\_\_\_\_\_ would \_\_\_\_\_ the exact end date for canceling \_\_\_\_\_ services.

Time when \_\_\_\_\_?

\_\_\_\_\_ know \_\_\_\_\_ my coverage won't \_\_\_\_\_?

When \_\_\_\_\_ axe my \_\_\_\_\_?

\_\_\_\_\_ me \_\_\_\_\_ my coverage is \_\_\_\_\_.

Is it possible \_\_\_\_\_ the \_\_\_\_\_ date for \_\_\_\_\_?

What \_\_\_\_\_ does the \_\_\_\_\_ of \_\_\_\_\_ insurance \_\_\_\_\_?

I'm looking for \_\_\_\_\_ date.

\_\_\_\_\_ like to know when \_\_\_\_\_ to lose \_\_\_\_\_.

I was \_\_\_\_\_ about the \_\_\_\_\_ date \_\_\_\_\_ insurance services.

\_\_\_\_\_ day \_\_\_\_\_ I no longer \_\_\_\_\_?

\_\_\_\_\_ my coverage stopped?

\_\_\_\_\_ effective date for \_\_\_\_\_.

\_\_\_\_\_ information \_\_\_\_\_ when I \_\_\_\_\_ lose insurance \_\_\_\_\_.

\_\_\_\_\_ my \_\_\_\_\_ end?

\_\_\_\_\_ I know \_\_\_\_\_ day is?

When \_\_\_\_\_ my \_\_\_\_\_?

Can \_\_\_\_\_ my \_\_\_\_\_ ending?

The date \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ let \_\_\_\_\_ when my \_\_\_\_\_ ends

\_\_\_\_\_ day \_\_\_\_\_ my \_\_\_\_\_ no longer \_\_\_\_\_?

\_\_\_\_\_ the exact date \_\_\_\_\_ policy \_\_\_\_\_?

\_\_\_\_\_ date for ending \_\_\_\_\_ is \_\_\_\_\_ clear.

\_\_\_\_\_ end on which \_\_\_\_\_.

Did you \_\_\_\_\_ a \_\_\_\_\_ for ending \_\_\_\_\_ policy?

\_\_\_\_\_ an exact cancellation \_\_\_\_\_ of \_\_\_\_\_?

cancellation \_\_\_\_\_?

I \_\_\_\_\_ the exact \_\_\_\_\_ date for canceling \_\_\_\_\_ insurance \_\_\_\_\_.

When \_\_\_\_\_ finished?

\_\_\_\_\_ day \_\_\_\_\_ I \_\_\_\_\_ longer \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ about \_\_\_\_\_ my coverage will cease \_\_\_\_\_?

Is \_\_\_\_\_ of \_\_\_\_\_ effective?

\_\_\_\_\_ my insurance \_\_\_\_\_ be cut off?

Is the effective terminated \_\_\_\_\_?

\_\_\_\_\_ what day \_\_\_\_\_ the end \_\_\_\_\_ insurance \_\_\_\_\_?

Is my \_\_\_\_\_ day \_\_\_\_\_?

Do \_\_\_\_\_ know the \_\_\_\_\_ for canceling your \_\_\_\_\_?

Which \_\_\_\_\_ the end of \_\_\_\_\_?

\_\_\_\_\_ about when my coverage will \_\_\_\_\_.

Please give the \_\_\_\_\_.

What \_\_\_\_\_ does my \_\_\_\_\_

\_\_\_\_\_ policy \_\_\_\_\_ to \_\_\_\_\_ canceled?

\_\_\_\_\_ effective date \_\_\_\_\_ end coverage?

What is the \_\_\_\_\_ after which \_\_\_\_\_?

Can you \_\_\_\_\_ date?

\_\_\_\_\_ is \_\_\_\_\_ effective date \_\_\_\_\_ terminates?

What \_\_\_\_\_ the \_\_\_\_\_ end of coverage?

\_\_\_\_\_ what \_\_\_\_\_ does \_\_\_\_\_ end of insurance \_\_\_\_\_?

\_\_\_\_\_ can I expect \_\_\_\_\_ have \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ date \_\_\_\_\_ coverage end?

Do \_\_\_\_\_ know \_\_\_\_\_ the cessation of \_\_\_\_\_ policy's \_\_\_\_\_?

\_\_\_\_\_ at a certain point?

What \_\_\_\_ the \_\_\_\_ \_\_\_\_ stopped \_\_\_\_ covered?  
\_\_\_\_ tell me \_\_\_\_ \_\_\_\_ \_\_\_\_ lose coverage.  
Which \_\_\_\_ \_\_\_\_ I \_\_\_\_ \_\_\_\_ covered?  
\_\_\_\_ you \_\_\_\_ when \_\_\_\_ coverage \_\_\_\_ ending?  
\_\_\_\_ does the \_\_\_\_ \_\_\_\_ coverage take \_\_\_\_?  
What's the \_\_\_\_ \_\_\_\_ lose \_\_\_\_ \_\_\_\_?  
\_\_\_\_ \_\_\_\_ will \_\_\_\_ \_\_\_\_ be terminated?  
\_\_\_\_ does the cancellation \_\_\_\_ \_\_\_\_ take \_\_\_\_?  
I \_\_\_\_ wondering \_\_\_\_ my \_\_\_\_ \_\_\_\_ end.  
\_\_\_\_ day am \_\_\_\_ \_\_\_\_ longer insured?  
Have \_\_\_\_ \_\_\_\_ coverage \_\_\_\_ \_\_\_\_ date?  
\_\_\_\_ is \_\_\_\_ policy cancellation \_\_\_\_?  
\_\_\_\_ information \_\_\_\_ when \_\_\_\_ \_\_\_\_ insurance coverage?  
\_\_\_\_ give the \_\_\_\_ \_\_\_\_ \_\_\_\_ of insurance  
\_\_\_\_ provide a \_\_\_\_ for \_\_\_\_ \_\_\_\_ insurance.  
\_\_\_\_ Effective Date \_\_\_\_ \_\_\_\_ over?  
\_\_\_\_ you \_\_\_\_ a \_\_\_\_ effective date for \_\_\_\_ \_\_\_\_ \_\_\_\_ my policy?  
\_\_\_\_ \_\_\_\_ time will my insurance \_\_\_\_ ending?  
\_\_\_\_ soon \_\_\_\_ my coverage \_\_\_\_?  
\_\_\_\_ day when the \_\_\_\_ insurance \_\_\_\_ \_\_\_\_?  
When \_\_\_\_ \_\_\_\_ \_\_\_\_ withdrawn?  
Do \_\_\_\_ know the \_\_\_\_ terminated \_\_\_\_ \_\_\_\_ my \_\_\_\_?  
\_\_\_\_ know when \_\_\_\_ \_\_\_\_ will be \_\_\_\_?  
\_\_\_\_ \_\_\_\_ me information about \_\_\_\_ my \_\_\_\_ will stop?  
When \_\_\_\_ \_\_\_\_ cessation \_\_\_\_?  
\_\_\_\_ is \_\_\_\_ date \_\_\_\_ can \_\_\_\_ \_\_\_\_ coverage?  
What \_\_\_\_ the \_\_\_\_ date \_\_\_\_ \_\_\_\_ \_\_\_\_ cut?  
\_\_\_\_ the effective \_\_\_\_ of \_\_\_\_ \_\_\_\_?  
I \_\_\_\_ \_\_\_\_ \_\_\_\_ know when I \_\_\_\_ lose \_\_\_\_ coverage.  
Date when \_\_\_\_ \_\_\_\_ \_\_\_\_?  
\_\_\_\_ \_\_\_\_ \_\_\_\_ date of my coverage \_\_\_\_?  
\_\_\_\_ \_\_\_\_ when coverage is \_\_\_\_ to \_\_\_\_.  
The \_\_\_\_ date \_\_\_\_ what my \_\_\_\_ \_\_\_\_.  
Can you confirm when \_\_\_\_ \_\_\_\_ \_\_\_\_ an \_\_\_\_?  
I want to know \_\_\_\_ \_\_\_\_ \_\_\_\_ of my \_\_\_\_ \_\_\_\_.  
\_\_\_\_ you \_\_\_\_ the \_\_\_\_ \_\_\_\_ lose coverage?  
I'm \_\_\_\_ when \_\_\_\_ coverage \_\_\_\_.  
\_\_\_\_ \_\_\_\_ about when \_\_\_\_ lose \_\_\_\_ coverage.  
Please give \_\_\_\_ date \_\_\_\_ when \_\_\_\_ \_\_\_\_ \_\_\_\_.  
Tell me \_\_\_\_ \_\_\_\_ am going \_\_\_\_ \_\_\_\_ \_\_\_\_.  
Can you let me \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ be covered?  
What \_\_\_\_ \_\_\_\_ insurance \_\_\_\_?  
\_\_\_\_ \_\_\_\_ tell me when \_\_\_\_ coverage \_\_\_\_ \_\_\_\_ for me?  
Let \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ is scheduled to end.  
What \_\_\_\_ does the \_\_\_\_ \_\_\_\_?  
\_\_\_\_ \_\_\_\_ \_\_\_\_ expect to \_\_\_\_ paying for \_\_\_\_?  
\_\_\_\_ \_\_\_\_ \_\_\_\_ expect \_\_\_\_ have no coverage?  
\_\_\_\_ is the day \_\_\_\_ \_\_\_\_ \_\_\_\_?  
When my \_\_\_\_ \_\_\_\_?  
\_\_\_\_ lost \_\_\_\_ on \_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ date for \_\_\_\_\_ ?

Do \_\_\_\_\_ know \_\_\_\_\_ coverage \_\_\_\_\_ to exist?

I would \_\_\_\_\_ to know the \_\_\_\_\_ date \_\_\_\_\_ .

When \_\_\_\_\_ seeing coverage?

I wish to \_\_\_\_\_ exact \_\_\_\_\_ date \_\_\_\_\_ your insurance \_\_\_\_\_ .

I \_\_\_\_\_ if you have \_\_\_\_\_ date \_\_\_\_\_ ending my policy.

\_\_\_\_\_ curious when \_\_\_\_\_ ends.

\_\_\_\_\_ you able to confirm when \_\_\_\_\_ ?

What \_\_\_\_\_ the effective \_\_\_\_\_ rid of \_\_\_\_\_ coverage?

Is \_\_\_\_\_ a \_\_\_\_\_ date \_\_\_\_\_ your \_\_\_\_\_ to \_\_\_\_\_ my policy?

\_\_\_\_\_ I \_\_\_\_\_ receiving my \_\_\_\_\_ ?

\_\_\_\_\_ what day \_\_\_\_\_ I \_\_\_\_\_ covered?

\_\_\_\_\_ know the date \_\_\_\_\_ insurance.

Is there \_\_\_\_\_ precise \_\_\_\_\_ for canceling your \_\_\_\_\_ ?

\_\_\_\_\_ I ending my \_\_\_\_\_ ?

\_\_\_\_\_ is \_\_\_\_\_ end \_\_\_\_\_ insurance?

What day was \_\_\_\_\_ ?

\_\_\_\_\_ need \_\_\_\_\_ know when \_\_\_\_\_ stops \_\_\_\_\_ .

\_\_\_\_\_ my coverage \_\_\_\_\_ end?

Can \_\_\_\_\_ tell me \_\_\_\_\_ time of \_\_\_\_\_ ?

\_\_\_\_\_ is \_\_\_\_\_ date \_\_\_\_\_ coverage terminates?

\_\_\_\_\_ point \_\_\_\_\_ my insurance \_\_\_\_\_ ?

When my insurance \_\_\_\_\_ ?

Do \_\_\_\_\_ about when \_\_\_\_\_ coverage \_\_\_\_\_ stop?

\_\_\_\_\_ the effective terminated date \_\_\_\_\_ my \_\_\_\_\_ ?

Do you know \_\_\_\_\_ stop \_\_\_\_\_ ?

When \_\_\_\_\_ stop??

\_\_\_\_\_ need to know \_\_\_\_\_ precise \_\_\_\_\_ date for \_\_\_\_\_ my \_\_\_\_\_ .

\_\_\_\_\_ was \_\_\_\_\_ plan ends.

\_\_\_\_\_ you \_\_\_\_\_ the \_\_\_\_\_ ending \_\_\_\_\_ canceling \_\_\_\_\_ insurance \_\_\_\_\_ to me?

When \_\_\_\_\_ coverage \_\_\_\_\_ ?

Tell me \_\_\_\_\_ date \_\_\_\_\_ will \_\_\_\_\_ .

\_\_\_\_\_ you \_\_\_\_\_ date of my \_\_\_\_\_ ?

When is \_\_\_\_\_ coverage \_\_\_\_\_ ?

\_\_\_\_\_ day is my \_\_\_\_\_ ?

What are \_\_\_\_\_ effective \_\_\_\_\_ coverage \_\_\_\_\_ ?

What day \_\_\_\_\_ ending \_\_\_\_\_ insurance \_\_\_\_\_ effective?

Is \_\_\_\_\_ date of \_\_\_\_\_ ?

\_\_\_\_\_ will \_\_\_\_\_ be discontinued?

I \_\_\_\_\_ know the exact ending date \_\_\_\_\_ your \_\_\_\_\_ .

I want \_\_\_\_\_ coverage is \_\_\_\_\_ .

Please \_\_\_\_\_ me of when \_\_\_\_\_ .

\_\_\_\_\_ will I \_\_\_\_\_ without \_\_\_\_\_ policy being terminated?

\_\_\_\_\_ you \_\_\_\_\_ the \_\_\_\_\_ will end?

\_\_\_\_\_ need to know the \_\_\_\_\_ stop being \_\_\_\_\_ .

At \_\_\_\_\_ would \_\_\_\_\_ be terminated?

\_\_\_\_\_ need \_\_\_\_\_ precise \_\_\_\_\_ for canceling my \_\_\_\_\_ services.

Can \_\_\_\_\_ day \_\_\_\_\_ coverage ends?

When is \_\_\_\_\_ ofhealth \_\_\_\_\_ ?

\_\_\_\_\_ when I will \_\_\_\_\_ be covered?

I'm wondering \_\_\_\_\_ will \_\_\_\_\_.

\_\_\_\_\_ is \_\_\_\_\_ now \_\_\_\_\_ I'm no longer \_\_\_\_\_?

Could \_\_\_\_\_ tell \_\_\_\_\_ when I'll \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ to \_\_\_\_\_ about the terminated \_\_\_\_\_.

Is \_\_\_\_\_ my coverage will \_\_\_\_\_?

Is a \_\_\_\_\_ ending \_\_\_\_\_ policy yet?

\_\_\_\_\_ date of \_\_\_\_\_ healthcare \_\_\_\_\_.

Can you tell \_\_\_\_\_ finished?

Have you \_\_\_\_\_ to \_\_\_\_\_ policy?

When \_\_\_\_\_ effective \_\_\_\_\_ coverage \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ cancellation \_\_\_\_\_ coverage effective?

\_\_\_\_\_ sure when \_\_\_\_\_ stopped.

When \_\_\_\_\_ ending for \_\_\_\_\_?

I want \_\_\_\_\_ know when I will \_\_\_\_\_.

\_\_\_\_\_ need \_\_\_\_\_ precise ending date for canceling \_\_\_\_\_.

Tell me \_\_\_\_\_ longer be \_\_\_\_\_.

When \_\_\_\_\_ my healthcare to \_\_\_\_\_?

Can \_\_\_\_\_ me \_\_\_\_\_ my \_\_\_\_\_ ending?

I am unsure when \_\_\_\_\_.

What \_\_\_\_\_ of my \_\_\_\_\_ plan \_\_\_\_\_?

\_\_\_\_\_ effective \_\_\_\_\_ my coverage being \_\_\_\_\_?

\_\_\_\_\_ will the \_\_\_\_\_ of \_\_\_\_\_ arrive?

\_\_\_\_\_ can you \_\_\_\_\_ when my \_\_\_\_\_?

\_\_\_\_\_ give \_\_\_\_\_ date of \_\_\_\_\_ of \_\_\_\_\_.

\_\_\_\_\_ will \_\_\_\_\_ coverage change \_\_\_\_\_?

\_\_\_\_\_ effective \_\_\_\_\_ of ending my \_\_\_\_\_?

When \_\_\_\_\_ my \_\_\_\_\_ coverage \_\_\_\_\_?

When will \_\_\_\_\_ take \_\_\_\_\_?

Is the end \_\_\_\_\_ on \_\_\_\_\_?

\_\_\_\_\_ cover cessation \_\_\_\_\_?

Can you tell me \_\_\_\_\_ of \_\_\_\_\_?

\_\_\_\_\_ is the \_\_\_\_\_ coverage \_\_\_\_\_ end?

When \_\_\_\_\_ cancelled?

\_\_\_\_\_ when my \_\_\_\_\_ terminates.

I \_\_\_\_\_ my \_\_\_\_\_ be terminated.

\_\_\_\_\_ termination of my \_\_\_\_\_ effective?

\_\_\_\_\_ I lose \_\_\_\_\_ on?

I am \_\_\_\_\_ the \_\_\_\_\_ ending date for \_\_\_\_\_ services.

What day \_\_\_\_\_ of \_\_\_\_\_?

\_\_\_\_\_ you \_\_\_\_\_ me a date \_\_\_\_\_ not \_\_\_\_\_ covered?

\_\_\_\_\_ will \_\_\_\_\_ stop covering \_\_\_\_\_?

I'm \_\_\_\_\_ sure what \_\_\_\_\_ date \_\_\_\_\_ I \_\_\_\_\_ coverage.

\_\_\_\_\_ when my insurance will \_\_\_\_\_.

When \_\_\_\_\_ the \_\_\_\_\_ of coverage \_\_\_\_\_?

\_\_\_\_\_ when I'm \_\_\_\_\_ to \_\_\_\_\_ coverage.

\_\_\_\_\_ the end \_\_\_\_\_ my insurance \_\_\_\_\_ effective?

What \_\_\_\_\_ do \_\_\_\_\_ not \_\_\_\_\_ coverage?

When \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ the end of my \_\_\_\_\_?

When \_\_\_\_\_ I expect \_\_\_\_\_ coverage \_\_\_\_\_?



Can \_\_\_\_\_ the \_\_\_\_\_ date for \_\_\_\_\_ of my insurance?  
 \_\_\_\_\_ anyone \_\_\_\_\_ when \_\_\_\_\_ insurance is \_\_\_\_\_?  
 \_\_\_\_\_ day \_\_\_\_\_ the \_\_\_\_\_ working?  
 \_\_\_\_\_ what \_\_\_\_\_ does my \_\_\_\_\_ to be \_\_\_\_\_?  
 \_\_\_\_\_ the precise ending \_\_\_\_\_ for \_\_\_\_\_ my insurance services.  
 I \_\_\_\_\_ to know the \_\_\_\_\_ date \_\_\_\_\_ my insurance \_\_\_\_\_.  
 \_\_\_\_\_ can I \_\_\_\_\_ to \_\_\_\_\_ insurance?  
 \_\_\_\_\_ the \_\_\_\_\_ date end \_\_\_\_\_?  
 Can you \_\_\_\_\_ know when I will \_\_\_\_\_?  
 \_\_\_\_\_ know \_\_\_\_\_ my insurance will \_\_\_\_\_?  
 Please \_\_\_\_\_ a date for \_\_\_\_\_.  
 Can you \_\_\_\_\_ when \_\_\_\_\_?  
 \_\_\_\_\_ me know the ending \_\_\_\_\_ of my \_\_\_\_\_?  
 \_\_\_\_\_ the canceled coverage \_\_\_\_\_?  
 I would like \_\_\_\_\_ the \_\_\_\_\_ date \_\_\_\_\_ the \_\_\_\_\_ of insurance \_\_\_\_\_.  
 \_\_\_\_\_ you \_\_\_\_\_ me \_\_\_\_\_ insurance will \_\_\_\_\_ over?  
 When \_\_\_\_\_ health coverage \_\_\_\_\_?  
 The ending \_\_\_\_\_ plan.  
 Is that \_\_\_\_\_ of insurance \_\_\_\_\_?  
 \_\_\_\_\_ the \_\_\_\_\_ the insurance being \_\_\_\_\_.  
 \_\_\_\_\_ date \_\_\_\_\_ policy cancellation is not \_\_\_\_\_.  
 The \_\_\_\_\_ when \_\_\_\_\_ of my insurance \_\_\_\_\_.  
 \_\_\_\_\_ my plan ends.  
 What \_\_\_\_\_ lost coverage?  
 \_\_\_\_\_ when \_\_\_\_\_ insurance ends.  
 What day \_\_\_\_\_ coverage \_\_\_\_\_ end?  
 \_\_\_\_\_ is \_\_\_\_\_ correct cancellation \_\_\_\_\_ policy?  
 \_\_\_\_\_ I \_\_\_\_\_ have coverage, \_\_\_\_\_ it?  
 \_\_\_\_\_ the \_\_\_\_\_ my \_\_\_\_\_ ends?  
 \_\_\_\_\_ will coverage be \_\_\_\_\_?  
 \_\_\_\_\_ cessation \_\_\_\_\_ take place?  
 I'm \_\_\_\_\_ when \_\_\_\_\_ longer being \_\_\_\_\_.  
 At \_\_\_\_\_ my \_\_\_\_\_ end?  
 \_\_\_\_\_ want \_\_\_\_\_ know the \_\_\_\_\_ my \_\_\_\_\_ ending.  
 \_\_\_\_\_ is the \_\_\_\_\_ of \_\_\_\_\_ coverage \_\_\_\_\_?  
 What \_\_\_\_\_ insurance ending?  
 \_\_\_\_\_ insurance becomes \_\_\_\_\_ what day?  
 \_\_\_\_\_ did \_\_\_\_\_ end?  
 \_\_\_\_\_ give me \_\_\_\_\_ date I \_\_\_\_\_ covered?  
 Can you tell \_\_\_\_\_ the \_\_\_\_\_ policy?  
 \_\_\_\_\_ is the \_\_\_\_\_ cancelling date \_\_\_\_\_?  
 \_\_\_\_\_ like to \_\_\_\_\_ effective \_\_\_\_\_ date.  
 Let \_\_\_\_\_ that \_\_\_\_\_ lose coverage.  
 What \_\_\_\_\_ ending date \_\_\_\_\_ plan?  
 \_\_\_\_\_ cover is \_\_\_\_\_?  
 When does \_\_\_\_\_?  
 When \_\_\_\_\_ being covered?  
 \_\_\_\_\_ will my coverage \_\_\_\_\_?  
 \_\_\_\_\_ have a \_\_\_\_\_ ending date for \_\_\_\_\_ insurance?  
 I \_\_\_\_\_ to \_\_\_\_\_ precise \_\_\_\_\_ date for \_\_\_\_\_ insurance \_\_\_\_\_ to me.

The \_\_\_\_\_ of \_\_\_\_\_ healthcare \_\_\_\_\_?  
\_\_\_\_\_ would like \_\_\_\_\_ know the ending \_\_\_\_\_ canceling \_\_\_\_\_.  
\_\_\_\_\_ like \_\_\_\_\_ what's \_\_\_\_\_ to \_\_\_\_\_ lose this coverage presented by the \_\_\_\_\_.  
\_\_\_\_\_ I \_\_\_\_\_ my coverage?

The \_\_\_\_\_ canceled is \_\_\_\_\_ known.  
\_\_\_\_\_ will my \_\_\_\_\_ be?  
\_\_\_\_\_ when \_\_\_\_\_ policy \_\_\_\_\_ day is.  
\_\_\_\_\_ does \_\_\_\_\_ insurance \_\_\_\_\_ working?

Please \_\_\_\_\_ a date \_\_\_\_\_ insurance.  
\_\_\_\_\_ let \_\_\_\_\_ know when \_\_\_\_\_ coverage \_\_\_\_\_  
\_\_\_\_\_ to know when my \_\_\_\_\_ cancellation \_\_\_\_\_.  
Can \_\_\_\_\_ me information about \_\_\_\_\_ I \_\_\_\_\_ insurance?  
\_\_\_\_\_ insurance ending?

Can \_\_\_\_\_ confirm \_\_\_\_\_ plan \_\_\_\_\_?  
\_\_\_\_\_ was \_\_\_\_\_ halted?  
\_\_\_\_\_ will my \_\_\_\_\_ insurance \_\_\_\_\_?  
\_\_\_\_\_ of coverage \_\_\_\_\_?  
\_\_\_\_\_ exact date my \_\_\_\_\_ canceled?

Did you know \_\_\_\_\_?  
\_\_\_\_\_ to know \_\_\_\_\_ insurance is \_\_\_\_\_ to be \_\_\_\_\_.  
\_\_\_\_\_ you know when \_\_\_\_\_ stopped \_\_\_\_\_?

On what \_\_\_\_\_ my \_\_\_\_\_ terminated?  
\_\_\_\_\_ day has \_\_\_\_\_ longer covered?  
\_\_\_\_\_ me the \_\_\_\_\_ date \_\_\_\_\_ my coverage?

After \_\_\_\_\_ do I \_\_\_\_\_ insurance \_\_\_\_\_?  
I do \_\_\_\_\_ know \_\_\_\_\_ policy \_\_\_\_\_ is.

When does \_\_\_\_\_ me?  
Can you confirm \_\_\_\_\_ coverage \_\_\_\_\_?  
\_\_\_\_\_ coverage was \_\_\_\_\_ canceled?

Can \_\_\_\_\_ clarify \_\_\_\_\_ ends?  
What day \_\_\_\_\_ interruption of \_\_\_\_\_ effective?  
I \_\_\_\_\_ terminated date of \_\_\_\_\_ coverage.  
I \_\_\_\_\_ the cessation of \_\_\_\_\_ effectiveness.

\_\_\_\_\_ should I stop \_\_\_\_\_?  
\_\_\_\_\_ will \_\_\_\_\_ insurance \_\_\_\_\_?  
\_\_\_\_\_ date where \_\_\_\_\_ coverage?  
Is \_\_\_\_\_ effective \_\_\_\_\_ for \_\_\_\_\_ coverage \_\_\_\_\_ unknown?

\_\_\_\_\_ like \_\_\_\_\_ know when \_\_\_\_\_ plan \_\_\_\_\_.  
\_\_\_\_\_ know when my \_\_\_\_\_ finish?  
Have you \_\_\_\_\_ the \_\_\_\_\_ for \_\_\_\_\_ policy to \_\_\_\_\_?  
\_\_\_\_\_ my \_\_\_\_\_ to expire?

When \_\_\_\_\_ I \_\_\_\_\_ my \_\_\_\_\_?  
I \_\_\_\_\_ to \_\_\_\_\_ the exact ending \_\_\_\_\_ your insurance \_\_\_\_\_.  
The \_\_\_\_\_ my insurance becomes \_\_\_\_\_ on \_\_\_\_\_?

How \_\_\_\_\_ can \_\_\_\_\_ stop \_\_\_\_\_?  
\_\_\_\_\_ is \_\_\_\_\_ date \_\_\_\_\_ discharging my \_\_\_\_\_?  
What's \_\_\_\_\_ time \_\_\_\_\_ coverage?  
\_\_\_\_\_ tell me the exact \_\_\_\_\_ my insurance?  
Exactly \_\_\_\_\_ effective \_\_\_\_\_ coverage ends?  
Can you \_\_\_\_\_ ends?

\_\_\_\_\_ let \_\_\_\_\_ know \_\_\_\_\_ date for \_\_\_\_\_.

\_\_\_\_\_ don't \_\_\_\_\_ my \_\_\_\_\_ day is.

Do you \_\_\_\_\_ when \_\_\_\_\_ will \_\_\_\_\_?

\_\_\_\_\_ know when \_\_\_\_\_ am no \_\_\_\_\_.

\_\_\_\_\_ time when \_\_\_\_\_ insurance will be \_\_\_\_\_?

\_\_\_\_\_ what \_\_\_\_\_ do I stop \_\_\_\_\_?

Do you have any information about \_\_\_\_\_ will \_\_\_\_\_ \_\_\_\_\_?

\_\_\_\_\_ coverage going \_\_\_\_\_ stop?

\_\_\_\_\_ I \_\_\_\_\_ when \_\_\_\_\_ termination date \_\_\_\_\_?

\_\_\_\_\_ the \_\_\_\_\_ of the coverage \_\_\_\_\_?

\_\_\_\_\_ is it \_\_\_\_\_ no longer \_\_\_\_\_?

Can you tell \_\_\_\_\_ I'm \_\_\_\_\_?

\_\_\_\_\_ know \_\_\_\_\_ no longer have \_\_\_\_\_?

Is \_\_\_\_\_ effective end \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ you \_\_\_\_\_ about \_\_\_\_\_ time of \_\_\_\_\_?

I want \_\_\_\_\_ know \_\_\_\_\_ date when \_\_\_\_\_.

\_\_\_\_\_ I stop \_\_\_\_\_ insurance?

\_\_\_\_\_ tell me \_\_\_\_\_ will cease.

\_\_\_\_\_ my coverage \_\_\_\_\_ end.

I \_\_\_\_\_ to \_\_\_\_\_ the \_\_\_\_\_ my coverage.

When \_\_\_\_\_ my \_\_\_\_\_ finish?

\_\_\_\_\_ like to know when my \_\_\_\_\_ terminated.

When \_\_\_\_\_ my \_\_\_\_\_ take \_\_\_\_\_?

\_\_\_\_\_ day is I \_\_\_\_\_?

What \_\_\_\_\_ I \_\_\_\_\_ being \_\_\_\_\_?

\_\_\_\_\_ Effective \_\_\_\_\_ Coverage end?

\_\_\_\_\_ is my \_\_\_\_\_ to \_\_\_\_\_?

\_\_\_\_\_ is the cancellation \_\_\_\_\_ my \_\_\_\_\_.

\_\_\_\_\_ the \_\_\_\_\_ terminated \_\_\_\_\_ my \_\_\_\_\_ known?

When \_\_\_\_\_ my \_\_\_\_\_ get \_\_\_\_\_?

When \_\_\_\_\_ longer be \_\_\_\_\_?

Can I know \_\_\_\_\_ my \_\_\_\_\_ going to \_\_\_\_\_?

Is \_\_\_\_\_ end date \_\_\_\_\_ policy?

Please \_\_\_\_\_ us \_\_\_\_\_ the \_\_\_\_\_ insurance.

\_\_\_\_\_ I no longer been \_\_\_\_\_?

\_\_\_\_\_ day after \_\_\_\_\_ I \_\_\_\_\_ longer \_\_\_\_\_?

I \_\_\_\_\_ wondering about \_\_\_\_\_ ending \_\_\_\_\_ for \_\_\_\_\_ insurance services.

Is the effective \_\_\_\_\_?

When do \_\_\_\_\_?

Can \_\_\_\_\_ me when \_\_\_\_\_ be terminated?

\_\_\_\_\_ policy is \_\_\_\_\_ to \_\_\_\_\_.

I'm wondering when \_\_\_\_\_.

\_\_\_\_\_ did \_\_\_\_\_ stop getting \_\_\_\_\_?

When does \_\_\_\_\_?

\_\_\_\_\_ day will my \_\_\_\_\_

\_\_\_\_\_ reveal when \_\_\_\_\_ ends?

\_\_\_\_\_ will \_\_\_\_\_ health \_\_\_\_\_ discontinued?

\_\_\_\_\_ the cancellation \_\_\_\_\_ coverage take \_\_\_\_\_?

I want to \_\_\_\_\_ when \_\_\_\_\_.

\_\_\_\_\_ have \_\_\_\_\_ information about \_\_\_\_\_ is going to stop?

Is the effective \_\_\_\_\_ unknown?  
\_\_\_\_\_ will \_\_\_\_\_ no longer \_\_\_\_\_?  
Tell \_\_\_\_\_ when \_\_\_\_\_ is \_\_\_\_\_ stop.  
What \_\_\_\_\_ I \_\_\_\_\_ being \_\_\_\_\_?  
\_\_\_\_\_ let me \_\_\_\_\_ this \_\_\_\_\_ ends.  
I \_\_\_\_\_ know \_\_\_\_\_ you \_\_\_\_\_ an effective \_\_\_\_\_ for \_\_\_\_\_ my policy.  
\_\_\_\_\_ the date \_\_\_\_\_ ending of \_\_\_\_\_.  
\_\_\_\_\_ I lose \_\_\_\_\_ date?  
When am I \_\_\_\_\_ policy?  
when \_\_\_\_\_ my \_\_\_\_\_?  
\_\_\_\_\_ communicate \_\_\_\_\_ coverage \_\_\_\_\_ end.  
Date \_\_\_\_\_ coverage?  
When will \_\_\_\_\_ to \_\_\_\_\_ insurance \_\_\_\_\_?  
Can you tell \_\_\_\_\_ when \_\_\_\_\_ covered?  
\_\_\_\_\_ date \_\_\_\_\_ I lose \_\_\_\_\_?  
What \_\_\_\_\_ by which \_\_\_\_\_ policy \_\_\_\_\_ canceled?  
\_\_\_\_\_ is \_\_\_\_\_ day \_\_\_\_\_ my insurance?  
The date when \_\_\_\_\_?  
Have you determined \_\_\_\_\_ effective \_\_\_\_\_ the \_\_\_\_\_ of \_\_\_\_\_?  
I \_\_\_\_\_ know \_\_\_\_\_ day \_\_\_\_\_ can \_\_\_\_\_ being \_\_\_\_\_.  
\_\_\_\_\_ was wondering \_\_\_\_\_ you could \_\_\_\_\_ the \_\_\_\_\_ of my \_\_\_\_\_.  
Is there any \_\_\_\_\_ the \_\_\_\_\_ of \_\_\_\_\_ policy's \_\_\_\_\_?  
When \_\_\_\_\_ stopped?  
\_\_\_\_\_ day will \_\_\_\_\_ end?  
\_\_\_\_\_ can I expect \_\_\_\_\_ insurance \_\_\_\_\_?  
Coverage \_\_\_\_\_ when?  
\_\_\_\_\_ will my \_\_\_\_\_ be \_\_\_\_\_?  
\_\_\_\_\_ end \_\_\_\_\_ healthcare plan?  
I want \_\_\_\_\_ know \_\_\_\_\_ I \_\_\_\_\_ being \_\_\_\_\_.  
Please \_\_\_\_\_ date \_\_\_\_\_ insurance ceased.  
When \_\_\_\_\_ my \_\_\_\_\_ be \_\_\_\_\_?  
Do \_\_\_\_\_ the \_\_\_\_\_ will cease?  
Is there \_\_\_\_\_ specific effective \_\_\_\_\_ of \_\_\_\_\_ policy?  
\_\_\_\_\_ don't know what \_\_\_\_\_ covered  
\_\_\_\_\_ when my coverage stops.  
When \_\_\_\_\_ my \_\_\_\_\_?  
When am \_\_\_\_\_ covered?  
When \_\_\_\_\_ no \_\_\_\_\_ coverage?  
\_\_\_\_\_ the effective day \_\_\_\_\_ coverage?  
Can \_\_\_\_\_ tell \_\_\_\_\_ date \_\_\_\_\_ my coverage?  
Can you \_\_\_\_\_ when \_\_\_\_\_?  
\_\_\_\_\_ exact cancellation \_\_\_\_\_ my \_\_\_\_\_?  
\_\_\_\_\_ coverage ceases?  
\_\_\_\_\_ there \_\_\_\_\_ effective \_\_\_\_\_ you have \_\_\_\_\_ for ending my \_\_\_\_\_?  
\_\_\_\_\_ tell \_\_\_\_\_ when \_\_\_\_\_ plan ends?  
\_\_\_\_\_ is \_\_\_\_\_ my healthcare plan \_\_\_\_\_?  
\_\_\_\_\_ will my insurance \_\_\_\_\_?  
\_\_\_\_\_ please confirm \_\_\_\_\_ plan ends?  
Please provide \_\_\_\_\_ date for \_\_\_\_\_.  
What \_\_\_\_\_ does \_\_\_\_\_ of \_\_\_\_\_ insurance \_\_\_\_\_ effective?

\_\_\_\_\_ tell \_\_\_\_\_ when \_\_\_\_\_ will \_\_\_\_\_ coverage?

\_\_\_\_\_ me \_\_\_\_\_ insurance is done?

\_\_\_\_\_ effective \_\_\_\_\_ when I'm no longer \_\_\_\_\_?

\_\_\_\_\_ will \_\_\_\_\_ health insurance \_\_\_\_\_?

\_\_\_\_\_ point \_\_\_\_\_ time \_\_\_\_\_ my insurance \_\_\_\_\_?

I \_\_\_\_\_ lose insurance coverage.

\_\_\_\_\_ which \_\_\_\_\_ insurance be terminated?

\_\_\_\_\_ please tell \_\_\_\_\_ date for canceling my insurance?

\_\_\_\_\_ I \_\_\_\_\_ end of my health \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ being covered?

The cancellation \_\_\_\_\_ my \_\_\_\_\_ into \_\_\_\_\_.

\_\_\_\_\_ you know \_\_\_\_\_ ends?

\_\_\_\_\_ will finish?

\_\_\_\_\_ coverage \_\_\_\_\_?

\_\_\_\_\_ I know \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_?

\_\_\_\_\_ you \_\_\_\_\_ of when I \_\_\_\_\_ have coverage?

When does \_\_\_\_\_ take \_\_\_\_\_?

Are \_\_\_\_\_ the effective terminated date \_\_\_\_\_ coverage?

\_\_\_\_\_ you tell me \_\_\_\_\_ lose \_\_\_\_\_?

Is there a \_\_\_\_\_ effective \_\_\_\_\_ for \_\_\_\_\_ yet?

Please provide \_\_\_\_\_ date \_\_\_\_\_ when \_\_\_\_\_.

\_\_\_\_\_ will \_\_\_\_\_ insurance \_\_\_\_\_?