## NATIONAL FINANCE CENTER CENTRALIZED ENROLLMENT CLEARINGHOUSE SYSTEM (CLER) SECURITY ACCESS FORM

CLER HEALTH BENEFIT										
ACTION (Add, Modify, Delete)		USER NAME	USER REFERENCE NUMBER	CARRIER NAME		CARRIER ID NUMBER		LEVEL OF ACCESS (Update, Inquiry)	EMAIL ADDRESS	
CLED DA	VPOLL OFFICE	HUMAN RESOURCE OFF	ICE DEDSONNEL							
ACTION (Add, Modify, Delete)		USER NAME	USER REFERENCE NUMBER	DEPARTMENT/AGENCY	RTMENT/AGENCY PC		POI	LEVEL OF ACCESS (Update, Inquiry, Transmit)	EMAIL ADDR	ESS
REMARKS										
CLER SECURITY OFFICER			CLER SECURITY OFFICER TITLE		EMAIL			CLER SECURITY OFFICE	CLER SECURITY OFFICER SIGNATURE	
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