

Life Insurance

Beneficiary Designated Form

In the event of death, the listed beneficiary/ies will receive one payment equal to the employee's annual salary up to a maximum of \$50,000. In the event of an accidental death, the amount will be three times the annual benefit. A beneficiary must be designated.

Name of employer/group (if applicable)			
Employee Name		Social security no.	
PRIMARY BENEFICIARY(IES): Person or persons who will receive the life insurance proceeds upon your death.			
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Total percentages should add up to 100%. If no percentages are indicated, the proceeds will be divided equally. If no Primary beneficiary survives, proceeds will be paid to the Contingent beneficiary(ies) listed below. Space is provided at the bottom of the page if you wish to name additional Primary or Contingent beneficiaries.			
CONTINGENT BENEFICIARY(IES): Person or persons who will receive the life insurance proceeds if there is no surviving primary beneficiary.			
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Name		Date of birth	Social security no.
Address		Relationship to insured	% to be paid to beneficiary
Employee Signature		Date signed (MM/DD/YYYY)	
X			

**Life Insurance
Beneficiary Designation Form - continued**

THE EMPLOYER **MUST** KEEP THIS FORM ON FILE.

BENEFICIARY DESIGNATIONS

DEFINITIONS:

The purpose of designating beneficiaries for this policy is to instruct exactly how you wish the proceeds of your policy/certificate to be paid upon your death. Therefore, please take a moment to read the examples below:

PRIMARY BENEFICIARY:

Person or persons to receive the Life Insurance proceeds upon the death of the Insured. If multiple Primary Beneficiaries are listed, death benefits are divided equally among all the living Primary Beneficiaries, unless otherwise stated.

CONTINGENT BENEFICIARY:

Person or persons to receive the Life Insurance proceeds when the Primary Beneficiary(ies) dies before the Insured. If multiple Contingent Beneficiaries are listed, death benefits are divided equally among all the living Contingent Beneficiaries, unless otherwise stated.

EXAMPLES OF CORRECT BENEFICIARY DESIGNATIONS:

Joe and Jane Smith – Father and Mother

George Jones – Friend

William E. Brown – Spouse

Donald C. White, Jane E. Smith, and Richard E. Beck – Children

If you choose the estate or a trust as beneficiary, see the following example beneficiary designation:

Insured's Estate: John Q. Smith – trustee under the Mary R. Smith Trust dated 01/02/2006.

Full given names of each beneficiary must be clearly stated.

ADDITIONAL BENEFICIARY(IES)

PRIMARY

Name	Date of birth	Social security no.
Address		Relationship to insured
% to be paid to beneficiary		
Name	Date of birth	Social security no.
Address		Relationship to insured
% to be paid to beneficiary		
Name	Date of birth	Social security no.
Address		Relationship to insured
% to be paid to beneficiary		

CONTINGENT

Name	Date of birth	Social security no.
Address		Relationship to insured
% to be paid to beneficiary		
Name	Date of birth	Social security no.
Address		Relationship to insured
% to be paid to beneficiary		