

## BENEFICIARY DESIGNATION FORM INSTRUCTIONS

You may name any person, persons, institution, trust, estate, religious or charitable institution or other entity as your primary or contingent beneficiary(ies). List a person's full name (use proper name, not nickname), address, social security number and relationship to you. If the beneficiary is not related either by blood or marriage, insert the words, "Not Related". If a religious or charitable institution is listed, include the institution's tax identification number.

If you name more than one beneficiary it is understood that the beneficiaries listed and living at the time of your death will share equally in the distribution of the death benefit.

If you wish to indicate unequal distribution among beneficiaries, you may do so by stating the percent of the insurance benefit to be paid to each. The listed percentages must add up to 100%.

Please note that in no event may a beneficiary be changed by a Power of Attorney (POA).

Sample wording for common beneficiary designations are shown below:

**Example #1:**

Jane Doe	Relationship: Spouse	Benefit Percentage: 100%
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**Example #2:**

Jane Doe	Relationship: Spouse	Benefit Percentage: 50%
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Susan Doe	Relationship: Daughter	Benefit Percentage: 25%
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John Doe	Relationship: Son	Benefit Percentage: 25%
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If additional space is required, write, "See attached", on the beneficiary line on this form and attach a separate sheet, listing all the required beneficiary information for each beneficiary listed.

**This separate sheet should be signed by you (the Employee) and dated.**

If you need assistance in completing this form, contact your Company representative or your own legal counsel.

