

**BENEFICIARY  
DESIGNATION/CHANGE  
FORM**

The insurance company automatically designates beneficiaries to the first surviving class of the following class of persons: your spouse; your child or children; your mother or father; your sisters or brothers; and finally, your estate. If you wish to designate your beneficiaries differently than this sequence, you must complete this form and return it to the Policyholder.

<b>Policy Information</b>	
Policy Number:	Policy Effective Date:

<b>Insured Information</b>			
Insured Name:	SSN/Tax ID #:	Home Phone Number: ( ) -	Work Phone Number: ( ) - X
Address:			

<b>Primary Beneficiary Information</b>			
List your beneficiary(ies) and the percentage payable to each. If no percentage is indicated, the beneficiaries will share the benefit equally.			
Name	SSN/Tax ID #:	Relationship	Percentage
			Total = 100%

<b>Contingent Beneficiary Information</b>			
A contingent beneficiary will only receive a benefit if all primary beneficiaries are deceased. The contingent beneficiary for all benefit plans is your estate unless you choose another beneficiary. If you choose a contingent beneficiary other than your estate, list this beneficiary(ies) and the percentage payable to each below. If no percentage is indicated, the beneficiaries will share the benefit equally.			
Name	SSN/Tax ID #:	Relationship	Percentage
			Total = 100%

Insured's Signature: \_\_\_\_\_

Date: \_\_\_\_\_