

Signature

Beneficiary Designation Form

The following individual(s) will be my Beneficiary(ies) on the account number listed below. Unless otherwise documented and attached, all funds on deposit in all suffixes under this account number will be divided equally among the primary beneficiaries herein listed.

If you wish to add more detail to your Beneficiary Designation, you may add an additional sheet to describe how you would like your funds on deposit divided among your beneficiaries. For each deposit suffix, you may designate the percentage of funds on deposit that you would like to have distributed to each beneficiary. A different list of beneficiaries may be designated for each suffix under each account number. Please identify each beneficiary by Name, SS#, Birthdate, Relationship, and Mailing Address.

To update your beneficiaries on IRA accounts, please call 800-633-2848 to request an IRA Designation of Beneficiary form.

/lember N	ame (print)			Account #			
rimary Be	eneficiar(y)(ies)						
lame (1)			%	Name (2)			%
S#				SS#			
irthdate	Relationship		Birthdate	Relationship			
ddress				Address			
ity		State	Zip	City		State	Zip
Phone				Phone			
Name (3) %				Name (4) %			
SS#				SS#			
Birthdate	Relationship			Birthdate	Relationship		
Address				Address			
City		State	Zip	City		State	Zip
Phone			Phone				
Contingen	cy Beneficiar(y)(ies	s)					
Name (1) %				Name (2)			%
SS#				SS#			
Birthdate	Relationship			Birthdate	Relationship		
Address				Address			
City		State	Zip	City		State	Zip
Phone			Phone				

Date

SS#