

Statement of Designated Beneficiary

I, , hereby designate the following individual as my beneficiary:

Beneficiary Full Name:	<input type="text"/>
Relationship to Me:	<input type="text"/>
Date of Birth:	<input type="text"/>
Address:	<input type="text"/>
Phone Number:	<input type="text"/>

This beneficiary designation is made for the following account(s) or policy(ies):

I understand that this designation revokes any and all prior designations.

Signature:

Date: