

Additional Beneficiary(ies) (Continued from front)		
Name (last, first, middle initial)	Date of birth (month/day/year) / /	Percentage share %
Address (number and street)	City/State/ZIP	Relationship
Name (last, first, middle initial)	Date of birth (month/day/year) / /	Percentage share %
Address (number and street)	City/State/ZIP	Relationship
Name (last, first, middle initial)	Date of birth (month/day/year) / /	Percentage share %
Address (number and street)	City/State/ZIP	Relationship
CONSENT OF MEMBER'S SPOUSE		
<i>Spousal consent is required if the applicant is married and has not designated her/his spouse as the sole beneficiary.</i>		
<input type="checkbox"/> I hereby consent the beneficiary(ies) designated by my spouse above.		
Spouse's signature	Date	
Signature and stamp of Notary Public	Date	
SIGNATURE AND DATE		
Signature of person entitled to designate a beneficiary	Date	