

Instructions

- Be sure to show the Policy Number and Insured's Name at the top of this form. Use a separate form for each Policy.
- Do not send the Policy. Once the Beneficiary Designation has been recorded, a copy will be sent as confirmation of the change.
- If a beneficiary is a married woman, furnish her given name, e.g. "Mary S. Doe," not "Mrs. John A. Doe".
- Restate the entire designation, even if only changing a part of the designation.
- Do not specify dollar amounts. Instead, use parts or percentages (percentages must total 100%).
- If additional space is required, please attach separate page including Policy No., Date Signed, and Owner's Signature.

Signature Requirements

INDIVIDUAL OWNER(S) - Individual must sign on the line provided for "Owner."

PARTNERSHIP IS THE OWNER - Two authorized partners must sign below the name of the partnership, the title "Partner" must follow each signature.

CORPORATION IS THE OWNER - One officer other than the Insured or Owner must sign below the name of the corporation. The officer's title (President, General Manager, Vice President, Secretary or Assistant Secretary) and company stamp must follow the signature. A corporate resolution is required to support any signature. A beneficiary change to someone other than the corporation requires the signature of two authorized officers, other than the Insured, or a corporate resolution.

TRUST IS THE OWNER - If the benefits are payable to a trust, the trustee should complete the Beneficiary Designation and attach a statement that the trust is currently in force and that the trustee is now actively serving thereunder. The trustee should furnish the trust tax identification number and a copy of the first page and signature page, as well as those pages of the trust document relating to the appointment of the Trustee/Successor Trustee(s).

BENEFICIARIES - Any irrevocable beneficiary must sign subsequent beneficiary designation changes.

GUARDIAN OR CONSERVATOR OR AGENT ACTING UNDER A POWER OF ATTORNEY - The signature of a guardian or conservator or an agent acting under a power of attorney, (whichever applies) must sign on behalf of the Owner. Certified copies of the letters of guardianship/conservatorship and the court order that authorizes the change must also be submitted if acting under a guardianship/conservatorship. For those acting under a Power of Attorney, an affidavit of agent and the Questionnaire Accompanying the Power of Attorney must also be completed, and the complete Power of Attorney document attached.

Special Provisions

IF THE BENEFICIARY DIES - The interest of any beneficiary who dies before the Insured will terminate at the death of the beneficiary. The interest of any beneficiary who dies at the time of, or under certain policies within 30 days after the Insured's death, will also terminate if no proceeds have been paid to the beneficiary. If the interest of all named beneficiaries has terminated, any proceeds payable will be paid to the Owner of the Policy. If the Owner is not living at that time, any proceeds payable will be paid to the executor or administrator of the Owner's estate.

If any trust is named beneficiary, the Company shall not be responsible for the disposition by the trustee of any proceeds paid to such trustee.

Payment of proceeds to any beneficiary is subject to the interest of any assignee, whether collateral or otherwise.

Living children designated as beneficiaries must be named specifically whenever unborn children of the Insured are designated as beneficiaries. Any payment to a minor beneficiary shall be made to the legally appointed guardian of the minor, unless otherwise permitted by law.

Request for special settlement arrangements must be sent to the Company for preparation of the proper settlement agreement.

Sample Beneficiary Designations

♦ ONE PRIMARY AND ONE CONTINGENT:

Primary: Jane Doe, Wife
Contingent: John Doe, Jr., Son

♦ ONE BENEFICIARY:

Primary: Jane Doe, Wife

♦ INSURED'S ESTATE:

Primary: The Executor or Administrator of the Insured's Estate

♦ TRUSTEE UNDER TRUST:

Primary: ABC Bank, Anytown, CA 12345, Trustee under XYZ Trust,
dated _____

♦ SPOUSE OF INSURED OTHERWISE CHILDREN:

Primary: Jane Doe, Wife
Contingent: Any children born of the marriage of the Insured and said wife
(living children must be named)

OR

Primary: Jane Doe, Wife
Contingent: John Doe, Jr., Son and any other children of the Insured (living
children must be named)

♦ TWO BENEFICIARIES IN UNEQUAL AMOUNTS:

Primary: Jane Doe, Mother, 2 parts; John Doe, Brother, 1 part

♦ IRREVOCABLE BENEFICIARY:

Primary: Jane Doe, Former Wife of the Insured, irrevocably designated.

♦ PER STIRPES DESIGNATIONS:

Primary: Jane Doe, Wife
Contingent: John Doe, Jr., Son and any other children born of the marriage of the
Insured and said wife who are living, and per stirpes to the children who are living
of any deceased children of the Insured and said wife.

OR

Primary: Jane Doe, Wife
Contingent: Equal shares to John Doe, Jr. Son and Mary Doe, Daughter and per
stirpes to the children who are living of any deceased children of the Insured. If
there be no surviving beneficiaries, payment shall be made to Mary Doe, Mother
of the Insured.

♦ CORPORATE CREDITOR:

Primary: ABC Co., Inc., Creditor of the Insured, a California Corporation, its successors
and assigns, as its interest may appear, remainder, if any, to Jane Doe, Wife.

♦ INDIVIDUAL CREDITOR:

Primary: John Doe, Creditor, as his interest may appear, if living, otherwise to the
Executor or Administrator of said creditor's estate as their interest may appear,
remainder, if any, to Jane Doe, Wife.

♦ TRUSTEE UNDER LAST WILL AND TESTAMENT:

Primary: The trustee or successor trustee, under the last will and testament of the
Insured as admitted to probate. However, should the Insured die intestate or if no
trust is created, then to the Executor or Administrator of the Insured's estate.