

NECA Local No. 145 IBEW Welfare Plan
INSTRUCTIONS FOR COMPLETION OF LIFE & AD&D INSURANCE
DESIGNATION OF BENEFICIARY FORM

These instructions will assist you in properly completing the Life & AD&D Beneficiary Designation form.

1. Completion of this form automatically revokes all prior beneficiary designations. Therefore, even if a primary or contingent beneficiary is to remain, such beneficiary must be renamed on this form.
2. Sections A & B are completed. Please check if this is a new enrollment, reinstatement or beneficiary change.
3. Section C – *Insured/Plan Participant Information*: Print the full name of the Insured/Plan Participant, address, social security number, date of birth, occupation, effective date and your gender. (*Effective Date: is the date you became eligible for coverage.*)
4. Section D – *Beneficiary*: Print the full names of the designated primary and contingent beneficiaries, their relationships to the Plan Participant, their dates of birth, their % of share, their social security numbers, and their current addresses. Any death benefits will be paid to the person(s) named in the contingent beneficiary section if no primary beneficiary survives the Plan Participant. If no primary or contingent beneficiaries survive the Plan Participant, any death benefits will be paid to the Plan Participant’s estate. (*% of Share: This is the amount you have chosen for each beneficiary to receive. Remember that the total amount must add up to 100%.*)
5. You must sign and date this form in front of an independent witness who must also sign and date this form.
6. **Sample Beneficiary Designations**
 - a) *Married Spouse*: The full name of the married spouse should be stated, for example, “Mary Ann Doe” not “Mrs. Sam Doe.”
 - b) *Children*: If the Plan Participant desires to name **all** their children as a class of principal or contingent beneficiaries, the appropriate designation is “Lawful Children.” The term “Lawful Children” includes all children born to or legally adopted by the Plan Participant, including any children born after the date of this beneficiary designation. If a class designation is used, you must also list the names and addresses of all persons in the class presently living in the section which appears below. Stepchildren are **not** included in this designation. Stepchildren must be listed with complete name and relationship.
 - c) *Friend as Beneficiary*: If the death benefit is to be paid to a friend, the full name of the friend should be stated along with the relationship as “Friend.”
 - d) *Estate as Beneficiary*: If the death benefit is to be paid to the estate of the Plan Participant, the appropriate designation is “Plan Participant’s Estate.” If “Plan Participant’s Estate” is named as the principal beneficiary, no contingent beneficiary can be named. The Plan Participant’s estate is the final beneficiary if no named beneficiary survives.
 - e) *Trust as Beneficiary*:
 - i. *Inter Vivos (Living) Trust*. The trust must be in effect at the time the beneficiary designation is requested. If the Plan Participant desires the death benefit to be paid to a Trustee, the appropriate designation is “To _____ (Name of Trustee), or its successors in trust, as Trustee under _____ (Name of Trust) dated _____ (Date) and executed by _____ (Name of Plan Participant).”
 - ii. *Testamentary Trust*. If the Plan Participant desires the death benefit to be paid to a trust created by the provisions of their Last Will and Testament, the appropriate designation is “To the trustee or trustees named in the Last Will and Testament of the Plan Participant”

**Upon completion, this form is to be forwarded to the
Benefits Office: NECA Local No. 145 IBEW Welfare Plan
c/o RJLee & Associates, a TrueNorth Company
1700 52nd Avenue, Suite B
Moline, IL 61265**