

ROCHESTER INSTITUTE OF TECHNOLOGY

Life Insurance Beneficiary Designation Form

Employee Name: _____

Employee Number: _____ Extension: _____

I hereby elect the following Beneficiary(ies) for my Basic and Supplemental Life Insurance coverage, with the right to change this designation at any time. If you wish to make additional beneficiary designations, simply attach an additional sheet.

Name: _____ Primary: ____ or Secondary: ____

Address: _____ Birth Date: _____

_____ Relationship: _____

Social Security Number: _____ Percentage: _____

Name: _____ Primary: ____ or Secondary: ____

Address: _____ Birth Date: _____

_____ Relationship: _____

Social Security Number: _____ Percentage: _____

Name: _____ Primary: ____ or Secondary: ____

Address: _____ Birth Date: _____

_____ Relationship: _____

Social Security Number: _____ Percentage: _____

Name: _____ Primary: ____ or Secondary: ____

Address: _____ Birth Date: _____

_____ Relationship: _____

Social Security Number: _____ Percentage: _____

Use area below for any special beneficiary designation. (See sample wording on the back.)

EMPLOYEE SIGNATURE

Employee Signature: _____ Date: _____

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INSTRUCTIONS PERTAINING TO BENEFICIARY DESIGNATION

Be sure to use given names such as "Mary A. Doe", not "Mrs. John Doe" and include all information requested on the form. The following sample designations may be helpful to you:

<u>TYPE OF BENEFICIARY</u>	<u>STANDARD WORDING</u>
Estate	My Estate
One Beneficiary	Anna L. Doe, wife
Two Beneficiaries	John A. Doe, father, and Mary I. Doe, mother equally or to the survivor.
Three or more Beneficiaries	John A. Doe, father, Mary I. Doe, mother and Henry J. Doe, son or to the survivors or survivor.
One Beneficiary and one Contingent Beneficiary	Anna L. Doe, wife, if living, otherwise Henry J. Doe, son.
One Beneficiary and two Contingent Beneficiaries	Anna L. Doe, wife, if living, otherwise, Henry J. Doe and Alice G. Doe, daughter, children equally or to the survivor.
One Beneficiary and three or more Contingent Beneficiaries	Anna L. Doe, wife, if living, otherwise, Henry J. Doe, Alice G. Doe, and Charles B. Doe, children equally or to the survivors or survivor.
Two Beneficiaries and one Contingent Beneficiary	John A. Doe, father and Mary I. Doe, mother, equally or the survivor, otherwise Anna L. Doe, wife.
Two Beneficiaries in unequal portions	Three-quarters (3/4) of the proceeds to John A. Doe, father, if living, and one-quarter (1/4) to Anna L. Doe, mother, if living, the share of the deceased Beneficiary to be paid to the survivor, if any.
Trust with Individual Trustees	Richard Doe and John Smith, Trustees, or a successor in Trust under (Trust Name) established (Date of Trust Agreement).
Trust with Corporate Trustee	ABC Bank & Trust Company, Rochester, NY, Trustee or successor in Trust under (Trust Name) established (Date of Trust Agreement).
Testamentary Trust	Trustee of the Mary I. Doe Trust or successor in Trust established by the Last Will & Testament of the insured dated _____.
Minor Children	Richard Doe and John Doe, children, equally or to the survivor provided, however, that any proceeds that become payable to any such child during his or her minority shall be paid to Jane Doe, mother, if living, otherwise to the then acting and legally appointed guardian.
Three or more beneficiaries in equal shares (per stirpes)	Henry Doe, Alice Doe and Charles Doe, children or to the survivors or survivor, equally. Provided that if any of my children predecease me, the then surviving children of any such deceased child shall receive in equal portions the share their parent would have received if living.