BENEFICIARY DESIGNATION FORM		
PARTICIPANT'S NAME: (please print)		
With respect to any amount payable under the my death, I hereby revoke any beneficiary designation heretofore as my beneficiary.	e made to me, and in l	by reason of ieu thereof, I hereby designate the following
SECTION I - Check A, B or C bel	ow and be sure to co	mplete Section II
A.) 100% to my spouse:		
B.) 50% to my spouse and 50% to the following benef	ïciary(ies):	
 My children, per stirpes. (the interest left to my deceased children who have surviving children of My children, per capita. (the interest left to my me.) My beneficiary(ies) designated as follows: 	f their own.)	, , , , , , , , , , , , , , , , , , ,
Name:	Name:	
Address:	Address:	
Name:	Name:	
Address:		
C.) 100% to my beneficiary(ies) designated as follows		
Name:Relationship:	I	Relationship:
Address: Pct:%	Address:	Pct:%
Name:Relationship:	Name:	Relationship:
Address:Pct:%	Address:	Pct:%
SECTION II		
In the event an above named beneficiary is not living at the time beneficiary(ies):	of my death, I hereby	elect the following contingent
	Name:	
Address:		
Name:		Relationship:
Address:		
	ION III	
Executed by the undersigned thisday of, 2		
SIGNATURE OF PARTICIPANT Signature of Plan Trustee or Notary Public		
SPOUSAL CONSENT (Mandatory unless box below has been checked)		
I, spouse of the above named participant, hereby consent to the forgoing Beneficiary Designation.		
-OR- Signature of Spouse	I am currently <u>not</u> time during the las	married, and have not been married any t 12 months.