BENEFICIARY DESIGNATION FORM

PARTICIPANT'S NAME:	
(please print)	
With respect to any amount payable under the death, I hereby revoke any beneficiary designation heretofore mbeneficiary.	by reason of my adde to me, and in lieu thereof, I hereby designate the following as my
Section 1 - Check either A, B or C	below and be sure to complete Section II
A.) 100% to my spouse:	
B.) 50% to my spouse and 50% to the following ben	reficiary or beneficiaries:
My children, per stirpes. (the interest left to a deceased children who have surviving children	my children will be divided into one share for each child, including of their own.) y children will be divided into one share for each child who survives
Name:	Relationship:
Address:	Percentage:%
Name:	Relationship:
	Percentage:%
C.) 100% to my beneficiary or beneficiaries designa	
Name:	Relationship:
Address:	Percentage:%
Name:	Relationship:
Address:	Percentage:%
Se	ction II
In the event an above named beneficiary is not living at the time	e of my death, I hereby elect the following contingent beneficiaries:
Name:	Relationship:
Address:	Percentage:%
Name:	Relationship:
	Percentage:%
Executed by the undersigned thisday of	201
SIGNATURE OF PARTICIPANT	Signature of Plan Trustee or Notary Public
SPOUSAL CONSENT (Mandat	tory unless box below has been checked)
I, spouse of the al	pove named participant, hereby consent to the forgoing Beneficiary
Designation.	
-OR-	I am currently <u>not</u> married, and have not been married any
Signature of Spouse	time during the last 12 months.