

VIP Services: (888) 855-9856 | info@trustprovident.com
8880 W. Sunset Rd., Suite 250, Las Vegas, NV 89148

This beneficiary designation overrides all previous designations for this plan.

Section 1 Plan Participant Information

Title	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email	Last 4 Digits of Social Security Number		Account Number
<input type="text"/>	<input type="text"/>		<input type="text"/>
Name of Plan	Name of Employer		
<input type="text"/>	<input type="text"/>		
Address	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 2 Current Marital Status

- I Am Not Married** – I understand that if I become married in the future, my spouse will be my primary beneficiary unless I complete a new Designation of Beneficiary form and my spouse consents to my designation.
- I Am Married** – I understand that my spouse will be my primary beneficiary. However, I understand I may designate a primary beneficiary other than or in addition to my spouse if my spouse consents to my designation.

Section 3 Beneficiary Information

I designate that upon my death, the assets in my plan account be paid to the beneficiaries named below. If neither primary nor contingent is indicated, the individual or entity will be deemed to be a primary beneficiary. If more than one primary beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal share percentages. Multiple contingent beneficiaries with no share percentages indicated will also be deemed to share equally. The interest of any beneficiary that predeceases me terminates completely, and the percentage share of any remaining beneficiaries will be increased on a pro rata basis. If no primary beneficiaries survive me, the contingent beneficiaries shall acquire the designated share of the account.

<input type="checkbox"/> Primary	<input type="checkbox"/> Contingent	Share Percentage	<input type="text"/>	%
First Name	MI	Last Name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Address	City	State	Zip	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Tax ID (SSN/TIN)	Date of Birth (MM-DD-YYYY)	Relationship		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="checkbox"/> Primary	<input type="checkbox"/> Contingent	Share Percentage	<input type="text"/>	%
First Name	MI	Last Name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Address	City	State	Zip	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Tax ID (SSN/TIN)	Date of Birth (MM-DD-YYYY)	Relationship		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

