

Employer Name:

Life Insurance Company of North America New York Life Group Insurance Company of NY NYL GBS Customer Service Center Administered by Infosys McCamish Systems, LLC P.O. Box 14577

Des Moines, IA 50306-9279 Phone: 1.800.231.1193 Fax: 1.877.435.7181

Employee Social Security Number:

Beneficiary Designation Form

Employee Name:	poloyee Name: Employee Social Security Number:			
Current Address:	City:		State: Zip:	-
Home Phone:	Work Phone:			
Primary and Contingent Beneficiaries beneficiaries in equal shares. Proceeds are If you designate contingent beneficiaries as beneficiaries in equal shares. Unless otherw proportionately among the surviving beneficiaries.	paid to contingent benefici nd do not designate percer vise provided, the share of	aries only when there are no stages, proceeds are paid to t a beneficiary who dies before	surviving primary he surviving cont the insured will	y beneficiaries. ingent
If you need additional space to indicate you including the appropriate policy number, the	ur beneficiary designations, ne date, and your signature	, attach a separate piece of p 	aper using the be	elow format
Basic Term Life Insurance		Policy Number		
Employee's Primary Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Employee's Contingent Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Voluntary Term Life Insurance		Policy Number		
Employee's Primary Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Employee's Contingent Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Basic Accidental Death & Dismember	erment Insurance	Policy	Number	
Check here if you want to use the sam this section.	e designations here that yo	ou used for Life Insurance, ar	nd do not comple	te the rest of
Employee's Primary Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Employee's Contingent Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%

Note: This form is not complete without your signature. Please sign the form on the next page where indicated.

Voluntary Accidental Death & Dismemberment Insurance		Policy Number		
Check here if you want to use the sam this section.	ne designations here that you	used for Life Insurance, an	d do not complet	te the rest of
Employee's Primary Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
Employee's Contingent Beneficiary(ies):	Relationship	Social Security Number	Date of Birth	% (total must equal 100%)
				%
				%
				%
	·			

Community Property Laws - If you are married, reside in a community property state (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin), and name someone other than your spouse as beneficiary, payments of benefits may be delayed or disputed unless your spouse provides their signature in the space provided below.				
Spouse's Signature:	Date:			
Owner's Signature:	Date:			

Guidelines for Designation of Beneficiaries

General - Please be sure to include the beneficiary's full name, social security number and relationship to you. Providing this information can help expedite the claim process by making it easier to locate and verify beneficiaries.

Minors - While you may designate minors as beneficiaries, please note that claim payments may be delayed due to special issues raised by these designations. In the event of a claim and the beneficiary is a minor child, the insurance proceeds will not be released to the minor child. The insurance proceeds may be paid to a duly appointed guardian of the child's estate. You may want to obtain the assistance of an attorney in drafting your beneficiary designation(s).

Trust as Beneficiary - You may designate a trust as beneficiary, using the following form: "To [name of trustee], trustee of the [name of trust], under a trust agreement dated [date of trust]."

If you wish to designate a testamentary trust as beneficiary (i.e., one created by will), you should recognize the possibility that your will which was intended to create this trust may not be admitted to probate because it is lost, contested, or superseded by a later will. Claim payment delays can result if the beneficiary designation does not provide for this situation.

Domestic Partner - If you wish to designate your domestic partner as your beneficiary, you must complete a beneficiary form. Otherwise, your death benefit will be paid according to the provisions of the policy.

Life Status Changes - We recommend that you review your beneficiary designation(s) when significant life status events occur, such as marriage, divorce, or birth of a child.

See an Attorney! The above guidelines are general and are not intended to be relied on as legal advice. Unless your designation is a simple one, we recommend that you obtain the assistance of an attorney in drafting your beneficiary designation(s). A qualified attorney can help assure that your beneficiary designation correctly reflects your intentions, is clear and unambiguous, and meets legal requirements.