WESTCHESTER PUTNAM COUNTIES LABORERS HEAVY & HIGHWAY LOCAL NO. 60 – BENEFICIARY DESIGNATIONS

Member Name _____ DOB _____

Address _____

Book No. _____

Mariage Date _____ Divorce Date _____ Single _____
(Attach marriage certificate) (Attach divorce papers and QDRO)

Designate your Primary and Contingent Beneficiaries on the back of this card. The total allocation of all primary beneficiaries must equal 100%. Contingent Beneficiaries will be paid *only* if all primary beneficiaries do not survive the participant. The total allocation of all contingent beneficiaries must equal 100%. If member is married, any annuity benefits remaining will automatically go to their spouse.

_____ _____
Member Signature Date

_____
Notary Public

Primary Beneficiaries

Primary Beneficiary 1 Name		Gender ☐ M ☐ F	Social Security Number
Percentage	Relationship	Date of Birth	Telephone
Primary Beneficiary 2 Name		Gender ☐ M ☐ F	Social Security Number
Percentage	Relationship	Date of Birth	Telephone

Contingent Beneficiaries

Contingent Beneficiary 1 Name		Gender ☐ M ☐ F	Social Security Number
Percentage	Relationship	Date of Birth	Telephone
Contingent Beneficiary 2 Name		Gender ☐ M ☐ F	Social Security Number
Percentage	Relationship	Date of Birth	Telephone

For additional designated primary and contigent beneficiaries, please use separate card.