

# ANNUITY ACCOUNT BENEFICIARY

Soc.  
Sec.  
No.

Name \_\_\_\_\_  
LAST FIRST INITIAL

I hereby designate as my beneficiary to receive any moneys on deposit in my Individual Annuity Account with the Metal Lathers Local 46 Annuity Fund upon my death, the following:

Name of Beneficiary \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

In the event that the above named Beneficiary does not survive to receive all payments due after my death, I designate as CONTINGENT BENEFICIARY:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Date Signed \_\_\_\_\_ Signature \_\_\_\_\_

