

**CARPENTERS RETIREMENT SAVINGS FUND OF ILLINOIS
BENEFICIARY DESIGNATION FORM**

PRIMARY BENEFICIARY DESIGNATION

Instructions: If you name more than one beneficiary, include the percentage of the distribution that each beneficiary should receive. The percentage must equal 100 percent.

Name: _____

Address: _____

Relationship: _____ Percentage: _____

Name: _____

Address: _____

Relationship: _____ Percentage: _____

Participant's Signature: _____ Date: _____

Participant's Social Security Number: _____

MARRIED AND DESIGNATING A BENEFICIARY OTHER THAN YOUR SPOUSE.

Instructions: If you are married and have designated a beneficiary(ies) **other than your spouse**, your spouse must consent, in writing, to such designation and the consent must be witnessed by a Plan representative or notary public.

I acknowledge and consent to the above beneficiary(ies) as designated. I also understand that as a result of the above beneficiary(ies) designation, I am not entitled to a survivor or term certain benefit option upon my spouse's death, under the Plan. I understand that by my signature I am waiving my right to benefits to which I am otherwise entitled by law.

Spouse's Name: _____

Spouse's Signature: _____ Date: _____

Witnessed By:

Plan Representative: _____ Date: _____

(OR)

Notary Signature: _____ Date: _____

Notary Seal: