



**BENEFICIARY DESIGNATION FORM**  
**Retiree Basic Life Insurance**  
 Standard Life Insurance Company



Policy Number: <b>755566</b>	Policy Holder: <b>Multnomah County</b>	Policy Amount: <b>\$5,000</b>
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**Instructions:** Please complete this form to designate beneficiary(ies) for you Retiree life insurance. This form replaces all prior designations. If more than one beneficiary is named and no percentages are indicated, payment will be made in equal shares. If there are more than three (3) primary and/or contingent beneficiaries, please attach a separate sheet of paper. **Return the completed form to: retiree.program@multco.us or Multnomah County Retiree Program, 501 SE Hawthorne, Suite 400, Portland, OR 97214.**

<b>SECTION 1: Retiree Information</b>	
Name (Last name, First Name, MI)	Social Security Number
Address & Phone Number	Date of Birth

**SECTION 2: Primary Beneficiary(ies)**

I choose the person(s) named below to be the primary beneficiary(ies) of the Life Insurance Benefits that may be payable at the time of my death. If any primary beneficiary(ies) is disqualified or dies before me, his/her percentage of this benefit will be paid to the remaining primary beneficiary(ies).

Name & Address	Relationship	Social Security Number	Date of Birth	Percentage
<b>Total Must Equal 100%</b>				

**SECTION 3: Contingent Beneficiary(ies)**

If **all** primary beneficiaries are disqualified or die before me, I choose the person(s) named below to be my contingent beneficiary(ies).

Name & Address	Relationship	Social Security Number	Date of Birth	Percentage
<b>Total Must Equal 100%</b>				

**SECTION 4: Signature**

X \_\_\_\_\_  
 Retiree Signature

\_\_\_\_\_  
 Date

You may electronically sign with an Adobe Digital ID.

## Important Information about Designation of Beneficiaries

### Beneficiary Information

- **Primary Beneficiary(ies)** means the person(s) you choose to receive your life insurance benefits. Please specify the percentage of the benefit you want paid to each beneficiary; these percentages should total 100%. If any primary beneficiary is disqualified or dies before you, his/her percentage of the benefit will be paid to the remaining primary beneficiary(ies).
- **Contingent Beneficiary(ies)** means the person(s) you choose to receive your life insurance benefits only if **all** primary beneficiaries are disqualified or die before you. Please specify the percentage of the benefit you want paid to each beneficiary; these percentages should total 100%. If any contingent beneficiary is disqualified or dies before you, his/her percentage of the benefit will be paid to the remaining contingent beneficiary(ies).
- **Minor Beneficiary(ies)** – When you designate minors as beneficiaries, it is important to understand that insurance benefits may not be released to a minor child. They may, however, be paid to a court-appointed guardian of the child's estate. The regulations governing minor beneficiaries vary by state.
- **Trust** – You may designation a valid trust as beneficiary.

### Type of Coverage Information

- **Basic Life** is life insurance provided by your employer for which they pay the premiums.

### General Information

- **Updates to your Beneficiary Designation** – You can change your beneficiary designation at any time. You may wish to review your designation periodically.
- **Consult an Attorney** – This information is not intended to be relied on as legal advice. You may wish to get the assistance of an attorney to help ensure your beneficiary designation correctly reflects your intentions.