IBEW Local #81 Annuity Fund

c/o Fabian & Byrn LLC 425 Eagle Rock Avenue, Suite 105 Roseland, NJ 07068 Phone #: 888-335-0133 Fax #: 973-228-4240

Designation of Beneficiary Form

If you are married on the date of your death, your surviving spouse will receive the qualified pre-retirement survivor annuity according to the terms of the plan, <u>regardless of whom you designate here as a beneficiary</u>. If you are married any wish to name someone other than your spouse as beneficiary of any part of your death benefits, you must acknowledge that this designation may impair the survivor annuity payable to you spouse under the law, and your spouse must consent to your beneficiary designation in writing. Contact the Third Party Administrator, Fabian & Byrn, LLC, 425 Eagle Rock Ave, Suite 105, Roseland, NJ 07068; 888-335-0133, to obtain the necessary form.

The following beneficiary(ies) is designated to receive the benefits under the Plan which are payable upon my death subject to the above paragraph. I understand that if I have designated more than one beneficiary, payments will be made equally to them, unless otherwise indicated on this form. This designation supercedes any prior designation and shall remain effective until I execute a subsequent beneficiary designation made in writing and signed by me.

I understand that if I am married and have designated a beneficiary in addition to or other than my spouse, this designation will be valid only if my spouse consents to it at the time this designation is made.

Primary Beneficiary (ies)	
Address:	
Relationship to Participant:	
Contingent Beneficiary (ies):	
Address:	
Relationship to Participant:	
THIS QUESTION MUST BE ANSWE	ERED: Are you Single ? Married ?
Date:	Print Participant's Name
Participant Signature	Participant Current Address
Participant S.S. #	Address Continued
Participant Date of Birth	