

IBEW Local #81 Pension 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, regardless of whom you designate here as a beneficiary. If you are married and 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 your 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 Avenue, Suite 105, Roseland, NJ 07068, phone # 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 ANSWERED: Are you Single ? _____ Married ? _____

Date: _____

Print Participant's Name

Participant Signature

Participant Current Address

Participant S.S. #

Address Continued

Participant Date of Birth

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