

27-08 40th Avenue, 2nd Floor Long Island City, NY 11101-3725 (212) 465-8888 www.steamfitters.com FundOffice@steamny.com

PENSION FUND

Post Retirement Death Benefit Designation of Beneficiary

	EAMFITTER ction Trades Branch)		B. SERVICE (Metal Trade		
	rovides a death benefi your beneficiary. Fail				
please use the rev	anyone as your benef verse side of this for le to each beneficiar	m to list the			
Print in ink.	Be sure all signatures a	and dates are o	completed <u>in all se</u>	ections.	
Participant					_
	Name		Card Number/Book Number		
Current Marital Statu	s (√ one) □ Married	☐ Single	☐ Widowed	☐ Divorced	
Beneficiary					-
Fi	rst Name	Middle Initio	al	Last Name	
Beneficiary's Date of	Birth:		Phone #:		
Relationship to partic	cipant (If Any):		Percentage _		
Beneficiary's Address	Street				
	City & State			Zip Code	
♦ In the event	your Primary Beneficia	ry becomes d	eceased, please n	ame a Contingent Bene	ficiary.
Contingent Beneficia	o.				
Contingent beneficial	First Name	Middle	Initial	Last Name	===
Contingent Beneficia	ry's Date of Birth:		Phone #:		
Relationship to Partic	ipant (If Any):		Percentage_		
Contingent Beneficia	ry's Address				
	City & State			Zip Code	
•					
Participant's signati	ure		-	Date	

