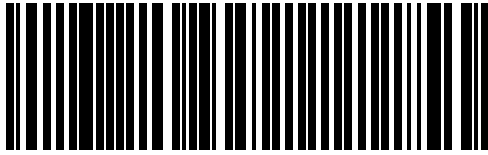




NA Administrative Services – B136
 2211 Congress Street
 Portland, Maine 04122

Colorado PERA



02910059512100000000

MEMBER NAME:

MAILING ADDRESS:

SOCIAL SECURITY #:

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ONLINE SELF-SERVICE AVAILABLE. SEE INSTRUCTIONS ON THE BACK OF THIS FORM.

Your designation can be changed only by you or your assignee. Your divorce, annulment or any dissolution or declaration of invalidity of your marriage SHALL NOT revoke the beneficiary designated by you or your assignee unless you revoke the designation by submitting a new paper form or making a change through the online process. Colorado Revised Statute § 15-11-804 does not act to revoke a spousal designation as a beneficiary.

BENEFICIARY DESIGNATION FORM

POLICY # 595121		TERM LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE	
PRIMARY BENEFICIARY (IES): NAME, ADDRESS AND TELEPHONE NUMBER	RELATIONSHIP TO MEMBER	BENEFIT PERCENT TOTAL MUST EQUAL 100%	BENEFICIARY SOCIAL SECURITY NUMBER
CONTINGENT BENEFICIARY (IES): NAME, ADDRESS AND TELEPHONE NUMBER			

MEMBER SIGNATURE

DATE SIGNED

NOTE: PLEASE SEE THE REVERSE SIDE OF THIS PAGE FOR INSTRUCTIONS.

Instructions: Complete your Beneficiary Designation and advise your designated beneficiaries that you have done so.

You may designate your beneficiaries online by accessing the Unum link through the PERA Web site: www.copera.org, click on “Account Access” and enter your PERA PIN. Select “Life Insurance” from the Inquiry dropdown menu and you will see the link to the Unum site. If you do not have a PERA PIN please contact the PERA Customer Service Center at 1-800-759-7372. If you prefer to complete the paper form, please use the return address or fax number noted below. For your paper designation(s) to be valid, you must sign and date the form.

Complete or verify personal information on the front of this form. Please be advised it may take up to 30 days to process the paper designations. At that time you may confirm your designations by accessing the PERA Web site.

List your first choices of beneficiaries under the PRIMARY BENEFICIARY(IES) section; be sure to include their name, Social Security number, their relationship to you and what percent you want to designate to the individual (the percentages must total 100%).

You may also list CONTINGENT BENEFICIARY(IES). These beneficiaries will receive the benefit in the event that all of your primary beneficiaries are deceased. Please be sure to include their name, Social Security number, their relationship to you and what percent you want to designate to the individual (the percentages must total 100%).

Where a beneficiary is related to the insured by blood or marriage, the relationship should be inserted, e.g., husband, wife, son, daughter, father, mother, grandfather, grandmother, uncle, aunt, cousin, sister-in-law, half-brother, etc. Where a beneficiary is not related to the insured by blood or marriage, any other relationship should be inserted, e.g., business associate, partner, creditor, fiancée, former wife, etc.

If you do not designate a beneficiary, the payment of benefits will default to the provisions of the contract.

If you have any questions, please call the Unum Service Center toll-free at 1-866-277-1649.

UNUM
NA Expanded Service Center - B136
2211 Congress Street
Portland, ME 04122-0001

Or FAX to: 1-207-575-0745