



Administered by:



# Group Life Beneficiary Designation

Basic Life\*

Voluntary Life\*

\*Please select the applicable plan(s) for your beneficiary designation. If designating different beneficiary(ies) for basic and voluntary plans, please complete a form for each plan.

## EMPLOYEE INFORMATION

Employer Name		Group Number	Location		Effective Date
Last Name (Employee or subscriber)		First Name	M.I.	Date of Birth	Social Security Number
Home Street Address	City/State/Zip		Home Phone	Work Phone	Cell Phone

### Choose only one:

Initial beneficiary designation(s)

Change of all prior beneficiary designation(s): I hereby revoke any previous beneficiary designation(s), if any, for my group term life insurance and/or accidental death and dismemberment (AD&D) insurance issued to this group or employer and direct that the insurance proceeds payable under the policy be paid as indicated below.

### NAMING THE BENEFICIARY:

It is important that your beneficiary designation be clear so that there will be no question as to your intent. It is also important that you name a primary and contingent beneficiary. When naming your beneficiary(ies) please indicate their full name, address, social security number, and relationship. If the beneficiary is not related either by blood or marriage, insert the words, "Not Related." If you need assistance, contact your Company representative or your own legal counsel.

## PRIMARY BENEFICIARY(IES)

Name:	Name:
Relationship:	Relationship:
Address:	Address:
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Benefit Percent (divided equally if left blank):	Benefit Percent (divided equally if left blank):

## CONTINGENT BENEFICIARY(IES)

Name:	Name:
Relationship:	Relationship:
Address:	Address:
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Benefit Percent (divided equally if left blank):	Benefit Percent (divided equally if left blank):

I, the undersigned, reserve the right to change the beneficiary(ies) without the consent of said beneficiary(ies).

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Underwritten by: National Guardian Life Insurance Company\*\*

Administered by: AlwaysCare Benefits, Inc. (a Starmount Life Insurance company)

P.O. Box 98100, Baton Rouge, LA 70898; PH: 1-888-729-5433

\*\*National Guardian Life Insurance Company is not affiliated with the Guardian Life Insurance Company of America a/k/a The Guardian or Guardian Life.

**BENEDES-1108**



### About Beneficiary Designations

If no beneficiary is named or if no beneficiary is living when the employee dies, the claims examiner will determine how benefits are to be paid. In these circumstances, a preference beneficiary affidavit may be requested. A preference beneficiary affidavit is a form completed by the next of kin that helps to identify who is entitled to the life insurance benefit.

## Frequently Asked Questions

**Q. Can an employee name anyone as beneficiary?**

A. An employee can name any person or entity they choose as a beneficiary. The beneficiary may be a relative, a friend, an acquaintance, a trust or a charity. The employee can change the beneficiary at any time without the consent of the beneficiary unless they have completed an assignment (if permitted by the policy) or an irrevocable beneficiary designation.

**Q. What is a primary beneficiary?**

A. A primary beneficiary is the beneficiary or beneficiaries that an employee names to receive benefits if they are living at the time of the employee's death. The primary beneficiaries are the first in line to receive death benefits.

**Q. What is a contingent beneficiary?**

A. A contingent beneficiary, or secondary beneficiary, is the beneficiary or beneficiaries named to receive the insurance proceeds if no primary beneficiary is alive at the time an employee dies.

**Q. How will benefits be paid if the employee names more than one primary or contingent beneficiary?**

A. Benefits will be paid in equal amounts to each of the beneficiaries in the same classification (primary or contingent) unless specific percentages are identified in the beneficiary designation. For example, if three primary beneficiaries are named, each beneficiary will receive one third of the benefits payable.

**Q. What if a beneficiary cannot be located when an employee dies?**

A. The death claim should be submitted with as much information as possible to assist in locating the named beneficiary. If the beneficiary cannot be located, benefits will be sent to the abandoned property division of the appropriate state at the end of the state dormancy period.

**Q. Who is the beneficiary for dependent life coverage? Can this be changed?**

A. The beneficiary for all dependent life benefits (spouse/domestic partner or children) is automatically the employee. This cannot be changed.

**Q. Can a minor child be named as a beneficiary?**

A. Yes, however benefits can not be released directly to the minor child. Benefits will be paid to the court-appointed guardian of the estate (or property) of the minor child. Though parents are generally the guardian of a minor child's "person," they are not automatically the guardian of the minor's estate. A parent may need to petition a local probate court where the child lives to be named guardian of the child's estate.

**Q. If a parent was named the guardian of a minor child or has custody of a child through a divorce decree, is he or she able to receive the benefits for the minor child?**

A. Though the parent may be named the guardian of a minor child's "person" or may have been granted custody, he or she is not automatically the guardian of the minor's estate. Local Family or Probate court involvement may be necessary to allow payment to a parent.

**Q. If benefits are payable to an estate, to whom are they paid?**

A. Benefits that are payable to an estate will be released to the court-appointed representative of the estate. The person is usually identified as executor, administrator or personal representative of the estate. Certified estate papers issued by the court are required.