Beneficiary Designation/Change

MEMBER/EMPLOYEE INFORMATION

Your Name (Last, First, Middle)



Birth Date

This beneficiary designation will apply to group Life and Accidental Death & Dismemberment Insurance issued by The Northwestern Mutual Life Insurance Company (Northwestern Mutual) and made available to you through your employment with your Employer.

Please make beneficiary designations below, or on an attached separate sheet of paper. Beneficiary designations are not valid unless they are signed, dated, and delivered to your Employer during your lifetime. Return this completed form to your employer's Human Resources Department and retain a copy for your records.

Policyowner Name			Policy No	Policy No.			
BENEFICIARY INFOR	RMATION		I				
PRIMARY		D: #			2011	0/ 5	
Full Name	Address	Birth Date	Phone No.	Relationship	SSN If known	% of Benefit*	
 						-	
						-	
CONTINGENT							
Full Name	Address	Birth Date	Phone No.	Relationship	SSN If known	% of Benefit*	
*Total must equal 100	% for each class						
iotai must equal 100	/0 101 GaCI1 Class						
Signature of Member/Employee	3			Date			

BENEFICIARY INFORMATION

- Your designation revokes all prior designations.
- Benefits are payable to a contingent Beneficiary only if you are not survived by one or more primary Beneficiaries.
- If you name two or more Beneficiaries in a class (primary or contingent), two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.

If a minor (a person not of legal age) or your estate is the Beneficiary, it may be necessary to have a guardian or a lega
representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, th
written trust must be identified in the Beneficiary designation. For example, "Dorothy Q. Smith, Trustee under the trust
agreement dated"

- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have questions, consult your legal advisor.
- Dependents Insurance, if any, is payable to you, if living, or as provided under your Employer's coverage under the Policy.
- If you complete the "% of Benefit" box(es), the amounts should add up to 100% for each class (primary or contingent). For example, "Primary John Q. Doe, 60%; Jane Q. Doe, 40%."