

Mailing Address:
Des Moines, IA 50392-0002

Principal Life
Insurance Company

Beneficiary Designation/
Change

Company Name Account/U			Unit Number	
Laborers District Council of Western PA Welfare Fund		103080	1030801	
Employee Information				
Your name (last, first, middle initial)	Phone number	SSN		
Marital status Single Married Divorce	ed Widowed			
Address				
City State Zip				
Section I Group Term Life Beneficiary Designa	ation (Complete if covered for gro	up term life cov	erage.)	
All primary and contingent beneficiaries, whether designation below. If designating a minor, pleas UTMA section.  Primary Beneficiaries:				
Name	Phone number Mi	nor Percentage	Relationship	
Address			SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address		<u>.</u>	SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address		1	SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address			SSN	
Contingent Beneficiaries:				
Name	Phone number Mi	nor Percentage	Relationship	
Address			SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address		l .	SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address	1	l .	SSN	
Name	Phone number Mi	nor Percentage	Relationship	
Address		I	SSN	

Minor Beneficiary - UTMA: ONLY COMPLETE	IF THE BENEFICIARY LISTED ABOVE IS A MINOR.
If any proceeds become payable to a beneficiary to Minors Act, as specified herein, such proceeds	
	(Name)
	(Address)
as custodian for such beneficiary:	(
(Check One Only) See instructions on Page 3.	
under the Iowa Uniform Transfers to Minor A	ct.
the beneficiary resides in California or Ohio at t	e state where the beneficiary shall reside at the time of payment. In the event the time of payment, the custodianship is to continue until the beneficiary 18, 19, 20, 21, 22, 23, 24 or 25) orfor Ohio (insert 18, 19, 20 or 21).
In the event a substitute custodian is needed, the	following is/are nominated, in the order named:
Name	Address
Name	Address
Minors Act, or if the law of the state so specified of established under the lowa Uniform Transfers to N	above, or if the state so specified has not enacted the Uniform Transfers to does not provide for such payment to a custodian, the custodianship shall be Minors Act. If the specified Uniform Transfers to Minors Act would require the term of payment, the proceeds payable to that beneficiary shall be paid
Section III Signature	
Read important instructions on Page 3 before	signing.
Signature of employee	- Date signed
After this form is completed and signed, se	end to:
Laborers' Combined Funds	
12 Eighth Street, Suite 500	
Pittsburgh, PA 15222	
pension@lfcowpa.com	
fax (412)263-2813	
Note: make a copy of Page 1and	2 for your records and distribute copy to employee.

## Minor Beneficiary - UTMA Instructions - Please Note the Following:

- You may wish to consult with your attorney about the completion of this beneficiary designation. The following comments
  are of a general nature and are not intended to be legal advice, or to substitute for legal advice.
- 2. Naming a custodian and substitutes. A custodian must be named in the blank following the words "paid to" in the designation. It is strongly recommended that you also name at least one (and preferably two or more) substitute custodians on the lines provided for that purpose. A substitute custodian would serve if, at the time of payment, the first-named custodian is deceased or otherwise unable or unwilling to serve. The custodian (and each substitute) listed on the beneficiary designation should be either: (1) an individual who is now an adult; or (2) a trust company, such as a financial institution with a trust department.
- 3. Specifying the state law. You may specify that the custodianship be established under the Iowa Uniform Transfers to Minors Act, regardless of where the minor lives. Principal Life Insurance Company is based in Iowa and therefore may transfer funds to a custodian in any state for the benefit of a minor in any state if the beneficiary designation specifies that the transfer shall be made under the Iowa Uniform Transfers to Minors Act. The Iowa Uniform Transfers to Minors Act defines a "minor" as an individual who has not reached age 21.

Alternatively, you may specify that the custodianship be established under the law of whatever state the beneficiary may live in at the time of payment. If this happens to be a state that has not enacted the Uniform Transfers to Minors Act, the designation specifies that the custodianship will be established under the lowa Uniform Transfers to Minors Act. If there is a possibility that the minor beneficiary will live in California or Ohio at the time of payment, you may wish to fill in one or both of the blanks specifying the age at which the custodianship is to terminate (see below). The ability to specify such an age in the beneficiary designation is a unique feature of the Ohio and California Uniform Transfers to Minors Acts.

The state specified in the designation may affect the age at which the beneficiary will have control of the money. Under the Uniform Transfers to Minors Act as enacted in many states, a custodianship created pursuant to a beneficiary designation terminates when the beneficiary reaches the legal age of majority (usually 18), even though custodianships created pursuant to a lifetime gift may terminate at a later age. However, under the lowa Uniform Transfers to Minors Act, and in a few states, a custodianship created pursuant to a beneficiary designation continues until the beneficiary reaches age 21. As noted above, custodian nominations under the California Uniform Transfers to Minors Act may specify an age (up to the age of 25) for the custodianship to terminate. If no age is specified, the California custodianship will terminate at age 18. Custodianships under the Ohio Transfers to Minors Act terminate at age 21 unless the beneficiary designation specifies that it will terminate at age 18, 19 or 20.

## Sample Beneficiary Designations

Be sure to use given names such as "Mary M. Doe," not "Mrs. John Doe" and include address and relationship of the beneficiary or beneficiaries to you.

Proposed Beneficiary	Suggested Wording for Beneficiary "name"
Insured's Estate	My Estate
Trust with Individual Trustees	Richard Doe and John Smith, Trustees, or a Successor in Trust under (Trust Name) established XX/XX/XXXX
Present or Living Trust	ABC Bank & Trust Company, Des Moines, Iowa. Trustee under (Trust Name) established XX/XX/XXXX
Testamentary Trust	Trustee of Mary I Doe Trust or Successor in Trust established by the Last Will & Testament of the Insured Dated XX/XX/XXXX