



## International Union of Painters and Allied Trades

MEMBER'S NAME

S.S./S.I. NO.

### DESIGNATION OF BENEFICIARY

I hereby designate as my beneficiary:

PRIMARY

1. BENEFICIARY \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

SECONDARY

2. BENEFICIARY \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

SIGNATURES MUST BE ORIGINAL ON BOTH PARTS  
SIGN EACH PART SEPARATELY

DATE \_\_\_\_\_, 20 \_\_\_\_\_

MEMBER'S  
SIGNATURE X \_\_\_\_\_ LU. NO. \_\_\_\_\_

DATE \_\_\_\_\_, 20 \_\_\_\_\_

FIN. SEC'R'S  
SIGNATURE X \_\_\_\_\_ LU. NO. \_\_\_\_\_

STOCK NO. 0017 (02/12) 1,000



**LOCAL UNION'S FILE COPY**