

BOILERMAKERS LODGE NO. 154 RETIREMENT FUND

FUND OFFICE: GEMGroup, Administrator, 1200 Three Gateway Center, Pittsburgh, PA 15222
(412) 471-2885 / 1-800-242-8923 / Fax: (412) 471-0944

SURVIVOR BENEFIT ELECTION

(PLEASE PRINT)

PARTICIPANT'S NAME	
SOCIAL SECURITY NO:	PHONE NO:
ADDRESS:	
DATE OF BIRTH:	

PRIMARY BENEFICIARY(IES)

1.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:
2.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:
3.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:

SECONDARY BENEFICIARY(IES)

1.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:
2.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:
3.	NAME:	SOCIAL SECURITY NO:
	ADDRESS:	BIRTH DATE:
		RELATIONSHIP:
	CITY, STATE, ZIP:	PERCENTAGE:

If married, your spouse is automatically your Primary Beneficiary. If you are married and wish to designate someone other than or in addition to your spouse as your Primary Beneficiary, then the "Spousal Consent" on Page 2 must be completed and notarized.

Participant's Signature: _____ Date: _____