



**MARSCO**

**DESIGNATION OF BENEFICIARY  
FOR ADDITIONS OR CHANGES TO BENEFICIARY DESIGNATION**

PARTICIPANT INFORMATION			
FIRST NAME	MIDDLE	LAST	DATE OF BIRTH
STREET ADDRESS		CITY	STATE ZIP
TELEPHONE NUMBER		SOCIAL SECURITY NUMBER	
MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED (NOTE: Spousal consent may be required. See below).			

ACCOUNT INFORMATION
ACCOUNT NUMBER:

BENEFICIARY INFORMATION
<input type="checkbox"/> ADDITION OF BENEFICIARY: I hereby make the following beneficiary additions pursuant to the retirement account indicated above. <input type="checkbox"/> CHANGE OF BENEFICIARY: I hereby revoke all prior beneficiary designations and designate the following beneficiaries for my account.
<p>The following shall be my beneficiary or beneficiaries of this IRA. If I designate more than one primary or contingent beneficiary, but do not specify the percentages to which such beneficiary or beneficiaries is entitled, payment will be made to the surviving beneficiary or beneficiaries in equal shares.</p>

PRIMARY BENEFICIARIES	
NAME:	NAME:
RELATIONSHIP:	RELATIONSHIP:
ADDRESS:	ADDRESS:
PERCENTAGE: DATE OF BIRTH:	PERCENTAGE: DATE OF BIRTH:
SOCIAL SECURITY NUMBER:	SOCIAL SECURITY NUMBER:

CONTINGENT BENEFICIARIES	
NAME:	NAME:
RELATIONSHIP:	RELATIONSHIP:
ADDRESS:	ADDRESS:
PERCENTAGE: DATE OF BIRTH:	PERCENTAGE: DATE OF BIRTH:
SOCIAL SECURITY NUMBER:	SOCIAL SECURITY NUMBER:

SPOUSAL CONSENT	
(Use in community or marital property states—LA, ID, NM, TX, WA, AZ, LA, NV, WI)	
<p>This section should be signed by the spouse if the residence of the account holder is located in a community or martial property state and the account holder is married. Due to the important tax consequences of giving up one's community property interest, individuals signing this section should consult with a tax or legal adviser.</p> <p>I hereby give the account holder any interest I have in the funds or property deposited in the IRA and consent to the beneficiary designation(s) indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Custodian.</p>	
<hr/> Name of Spouse (first, middle initial, last)	<hr/> Signature of Spouse

<hr/> Account Holder Signature	Date	<b>FOR MARSCO USE ONLY</b>
		<hr/> Principal Signature      RR Signature      Date
		Account Number <hr/>