



Please complete and return this form to your Human Resources Administrator.
Please see reverse side for detailed instructions.

SECTION 1 - EMPLOYEE PERSONAL INFORMATION

EMPLOYEE: Mr. / Mrs. / Ms. / Miss _____
(First) (Middle) (Last)

EMPLOYEE ID NO. _____ **POLICY NO.** _____

SECTION 2 - LOSS OF LIFE BENEFICIARY DESIGNATION (All other losses are payable to the Employee)

Name (first, middle, last)	Address	Relationship to Employee	% Share	
				Revocable Irrevocable
				Revocable Irrevocable
				Revocable Irrevocable

In respect of minors, please name a trustee below to receive payment while the beneficiary is a minor:

SECTION 3 - LOSS OF LIFE CONTINGENT BENEFICIARY DESIGNATION (All other losses are payable to the Employee)

Name (first, middle, last)	Address	Relationship to Employee	% Share	
				Revocable Irrevocable
				Revocable Irrevocable
				Revocable Irrevocable

In respect of minors, please name a trustee below to receive payment while the beneficiary is a minor:

SECTION 4 - AUTHORIZATION AND SIGNATURE

SIGNATURE OF EMPLOYEE:

Signature _____ Date: (day/month/year)

SIGNATURE OF EMPLOYER'S AUTHORIZED REPRESENTATIVE:

Signature _____ Print Name _____ Date: (day/month/year)

Please make a copy for your records.

**INSTRUCTIONS FOR COMPLETING
LLOYD'S BENEFICIARY DESIGNATION FORM – AD&D**

In order to enroll in this plan, you must complete the attached Beneficiary Designation Form and return it to your HR representative **within 31 days.**

NOTE: If you make any corrections or deletions on the form, you must initial each change. You must not use correction tape or fluid (white-out) on the form,, otherwise the form will be invalid.

Section 1 - Employee Personal Information

Please **PRINT** your full name, Employee I.D. number and Policy Number.

Section 2 - Loss of Life Primary Beneficiary Designation

It is important that you designate a beneficiary for the Loss of Life benefit under the Accidental Death and Dismemberment insurance. Your designated beneficiary is the person who you choose to receive the life benefit amount if you die accidentally. Failure to designate a beneficiary will result in any life claim being paid to your Estate. (Payment for all losses under the "dismemberment" portion of this policy, such as loss of limb, etc. are payable to you.)

If you designate more than one beneficiary, you must indicate the percentage of the claim to be paid to each beneficiary (the total percentage for all beneficiaries combined cannot be more than 100%).

Where it applies, please indicate whether your beneficiary is "revocable" or "irrevocable":

- "Revocable" means you can change this beneficiary without their consent.
- "Irrevocable" means that you cannot change this beneficiary without their written consent.

If you designate a beneficiary who is a minor (under the age of 18), please name a trustee to receive payment on behalf of the minor.

Section 3 - Contingent Beneficiary Designation

You may want to designate a "contingent beneficiary" - an alternate beneficiary who you want to have the death benefit paid to in the event the beneficiaries you designated in Section 2 are not living at the time of your death. If so, please complete this section.

Where it applies, please indicate whether your beneficiary is "revocable" or "irrevocable":

- "Revocable" means you can change this beneficiary without their consent.
- "Irrevocable" means that you cannot change this beneficiary without their written consent.

If you designate a contingent beneficiary who is a minor (under the age of 18), please name a trustee to receive payment on behalf of the minor.

Section 4 - Authorization and Signature

You must sign and date your form, in INK, in order for a beneficiary designation to be eligible - only signatures in ink are acceptable, in the event a claim form needs to be filed with a court.

Please forward the original signed completed form to your HR representative and retain a copy for your records. A death benefit cannot be paid out to a beneficiary unless this has been completed in accordance with the instructions above.