## **Family Data Collection Form**



Spouse's

Gender

Male

Female

The following information will assist us in setting up your new account(s).

Return this COMPLETED FORM, VOIDED CHECK and ACCOUNT NUMBERS (when transferring accounts).

Contact's

Gender

Male

Female

Spouse's

Name

## Section 1 – Personal Information

Contact's

Name

Date		Social Sec		Date Social Security						
of Birth Number				of Birth			Number			
Contact's Expires			ires		Spouse's			Expires		
	rs Lic. #				Drivers L					
Conta					Spouse's					
Emplo			Calan	,	Employe Spouso's			C.	alamı	
	pation		Saldi	Salary Spouse's Occupation			Salary \$			
Conta				Spouse's			Ψ			
Email					Email	•				
Marit		$\square$ Never married $\square 2^{nd} + r$	marriage	□Separated	Marital		lever married	□2 <sup>nd</sup> + ma	rriage □Sepa	rated
Statu	S	□1 <sup>st</sup> marriage □Widov	_	□Divorced	Status	□1	st marriage	□Widow	□Divo	
Conta	act's Cell						Spouse's			
			Home	lome Phone			Cell			
Conta	act's Work		Home	Home Phone			Spouse's			
							Work _			
Legal, Addre	/Residentia	al								
City	233						State Zip			
O.c.							State		2.10	
	native Mail	ing								
Addre							T		Т	
	native Mail	ing					State		Zip	
City										
S	ection	2 – Beneficiary Desi	gnation	า						
_						_			_	
		by designate the following p							retirement ac	counts
pa	ayable by	reason of mine or my/our de	eath. Addi	tional space is a	ıvailable or	າ the next p	page if necessa	ry.		
,	All informa	tion must be completed for processir	ng. You mus	t initial any changes	s made on the	e form.	Contact's Be	neficiaries	Spouse's Ben	eficiaries
,	All informa	tion must be completed for processir	ng. You mus	t initial any changes  Date of Bir		e form.	Contact's Be Primary or	neficiaries	Spouse's Ben Primary or	eficiaries
No.	All informat	tion must be completed for processin  Beneficiary's Name & Address			rth	e form.		neficiaries Share %		eficiaries Share %
	All information			Date of Bir	rth ity# Re	lationship	<b>Primary</b> or		<b>Primary</b> or	
No.		Beneficiary's Name & Address		Date of Bir Social Securi listed abo	rth ity# Re		Primary or Contingent		Primary or Contingent	
<b>No.</b> 0.	Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi	rth ity# Re	lationship	Primary or Contingent		Primary or Contingent	
No.	Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi listed abo	rth ity# Re ove s	lationship	Primary or Contingent  Primary		Primary or Contingent  Primary	
<b>No.</b> 0.	Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi listed abo	rth ity# Re ove s	lationship	Primary or Contingent Primary Primary		Primary or Contingent Primary Primary	
<b>No.</b> 0.	Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi listed abo DOB:	rth ity# Re	lationship	Primary or Contingent Primary Primary		Primary or Contingent Primary Primary	
<b>No.</b> 0. 1.	Name: Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi listed abo	rth ity# Re	lationship	Primary or Contingent Primary Primary Contingent		Primary or Contingent Primary Primary Contingent	
<b>No.</b> 0.	Name: Name: Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:	rth ity# Re OVC S	lationship	Primary or Contingent Primary Primary		Primary or Contingent Primary Primary	
<b>No.</b> 0. 1.	Name: Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securi listed abo DOB:	rth ity# Re OVC S	lationship	Primary or Contingent Primary Primary Contingent Primary		Primary or Contingent Primary Primary Contingent Primary Primary	
<b>No.</b> 0. 1.	Name: Name: Address Name: Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:  SS#:	rth ity# Re OVC S	lationship	Primary or Contingent Primary Primary Contingent Primary		Primary or Contingent Primary Primary Contingent Primary Primary	
No. 0. 1.	Name: Address Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:	rth ity# Re OVC S	lationship	Primary or Contingent Primary Primary Contingent Primary Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent	
<b>No.</b> 0. 1.	Name: Name: Address Name: Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:  SS#:  DOB:	rth ity# Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary	
No. 0. 1.	Name: Address Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:  SS#:	rth ity# Re OVE S	lationship	Primary or Contingent Primary Primary Contingent Primary Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent	
No. 0. 1.	Name: Address Name: Address Name: Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about the securion of the s	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary	
No. 0. 1.	Name: Address Name: Address Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about DOB:  SS#:  DOB:  SS#:  DOB:	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Contingent	
No. 0. 1.	Name: Address Name: Address Name: Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about the securion of the s	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2.	Name: Address Name: Address Name: Address Name:	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about the securion of the s	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Contingent	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about the securion of the s	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse		Date of Bir Social Securion listed about the securion of the s	rth ity # Re OVE S	lationship	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  Signature  3 - ACH Transfer	S	Date of Bir Social Securi listed about DOB:  SS#:  DOB:  SS#:  DOB:  SS#:  DOB:  SS#:  SS#:  SS#:	rth ity # Re OVE S	elationship spouse	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3  ACH Transfer Attach a voided check to thi	s form fro	Date of Bir Social Securi listed about DOB:  SS#:	th ity # Re DVC S	elationship spouse	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3  ACH Transfer Attach a voided check to thi	s form fro	Date of Bir Social Securi listed about DOB:  SS#:	th ity # Re DVC S	elationship spouse	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent		Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Primary  Primary  Primary  Primary  Primary	
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3 - ACH Transfer Attach a voided check to thi 4 - Account Numbe	s form fro	Date of Bir Social Securion listed about the securion of the s	bank chec	elationship spouse	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent	Share %	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent	Share %
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3 — ACH Transfer Attach a voided check to thi 4 — Account Numbe Attach a list of all brokerage	s form fro	Date of Bir Social Securion listed about the	bank chec	elationship spouse cking	Primary or Contingent  Primary  Primary  Contingent  Primary Contingent  Primary Contingent  Primary Contingent	Share %	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent	Share %
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3 - ACH Transfer Attach a voided check to thi 4 - Account Numbe	s form fro	Date of Bir Social Securion listed about the	bank chec	elationship spouse cking	Primary or Contingent  Primary  Primary  Contingent  Primary Contingent  Primary Contingent  Primary Contingent	Share %	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent	Share %
No. 0. 1. 2. 3.	Name: Address Name: Address Name: Address Address	Beneficiary's Name & Address Spouse  3 — ACH Transfer Attach a voided check to thi 4 — Account Numbe Attach a list of all brokerage	s form fro	Date of Bir Social Securion listed about the	bank chec	elationship spouse cking	Primary or Contingent  Primary  Primary  Contingent  Primary Contingent  Primary Contingent  Primary Contingent	Share %	Primary or Contingent  Primary  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent  Primary  Contingent	Share %

## Section 2 - Beneficiary Designation (continued if necessary)

Δ	All information must be completed for processing. You must initial any changes made on the form.			Contact's Ber	eficiaries	Spouse's Beneficiaries	
		Date of Birth		Primary or	61 0/	Primary or	61 0/
No.	Beneficiary's Name & Address	Social Security #	Relationship	Contingent	Share %	Contingent	Share %
5.	Name: Address:	DOB:		☐ Primary ☐ Contingent		Primary Contingent	
	Nieron						
	Name:	DOB:		Предоста		□ B.t	
6.	Address:	SS#:		Primary Contingent		Primary Contingent	
	Name:	DOB:					
7.	Address:	DOB		☐ Primary		☐ Primary	
,. 		SS#:		Contingent		Contingent	
	Name:	DOB:					
8.	Address:			Primary		Primary	
		SS#:		Contingent		Contingent	
	Name:	DOB:				_	
9.	Address:			Primary Contingent		☐ Primary ☐ Contingent	
		SS#:		Contingent		Contingent	
	Name:	DOB:					
10.	Address:	DOD		Primary		Primary	
10.		SS#:		Contingent		Contingent	
	Name;						
		DOB:	-	☐ Primary		Primary	
11.	Address:	00#.		Contingent		Contingent	
		SS#:					
	Name:	DOB:					
12.	Address:			Primary		Primary	
		SS#:		Contingent		Contingent	
		1	I	I		I	