

CARD 2
CONNECTICUT CARPENTERS PENSION FUND
SUMMARY OF PRE-RETIREMENT DEATH BENEFITS AND DESIGNATION OF BENEFICIARY

If you are under age 55, please complete Section A. If you have reached age 55, please complete Section B.

Section A – If you are under age 55, vested and–

1. **Married for one year**, your spouse will receive a monthly benefit based on the present value of the retirement benefit earned at the time of your death. If the value of the benefit is less than \$5,000, the benefit will be paid to your spouse in a lump sum. Please name your spouse in Section C below and sign at the bottom of this card.
2. **Single**, if eligible, I wish to have my beneficiary receive a monthly benefit for 120 months equal to the benefit I would have received if I had retired on a Ten Years Certain and Life Pension on the day before I died. The Consent Form on the reverse side and Section C must be completed.

Section B – If you are age 55 or older, vested and

1. **Married for one year**, you must check the appropriate box below.
 - (a) If eligible, I wish to have my pre-retirement death benefit paid as a Husband and Wife survivor benefit. My spouse will receive a monthly benefit equal to the amount I would have received if I had retired on a Husband and Wife Pension on the day before I died.
 - (b) If eligible, I wish to have my beneficiary receive a monthly benefit for 120 months equal to the benefit I would have received if I had retired on a Ten Years Certain and Life Pension on the day before I died. This choice is only available if I have my spouse's consent. The Consent Form on the reverse side and Section C must be completed.
2. **Single**, your beneficiary will receive a monthly benefit for 120 months equal to the benefit you would have received if you had retired on a Ten Years Certain and Life Pension on the day before you died. You must name your beneficiary in Section C, and the Certification that you are not married on the reverse side must be completed.

Section C – Beneficiary Designation

Person to receive pre-retirement death benefit:

Name of Spouse or other Beneficiary	Social Security #
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Address of Beneficiary	Relationship	Date of Marriage
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This Beneficiary Designation revokes all prior designations of beneficiary for the Connecticut Carpenters Pension Fund. You may change your Beneficiary Designation and your election under Section B at any time prior to your retirement by completing a new Beneficiary Designation form. If you are age 55 or over, have a spouse and do not make an election, the Husband and Wife survivor benefit will be the automatic form of payment in the event of your death.

Date _____ Social Security Number _____

Member's Signature _____

Member's Name (please print) _____

**CONNECTICUT CARPENTERS PENSION FUND
CONSENT FORM**

CONSENT OF SPOUSE (Must be completed if you are vested, have a spouse and have indicated that you wish to receive your pre-retirement death benefit in the form of a Ten Years Certain and Life Pension.

I HEREBY CONSENT TO MY SPOUSE'S ELECTION TO WAIVE THE HUSBAND AND WIFE PRE-RETIREMENT DEATH BENEFIT. I HAVE REVIEWED THE INFORMATION FURNISHED TO MY SPOUSE BY THE CONNECTICUT CARPENTERS PENSION FUND REGARDING THE EFFECT OF MY SPOUSE'S ELECTION TO WAIVE THE HUSBAND AND WIFE DEATH BENEFIT, AND I UNDERSTAND THE EFFECT OF THIS ELECTION. I CONSENT TO MY SPOUSE'S ELECTION OF THE PRE-RETIREMENT TEN YEARS CERTAIN AND LIFE FORM OF DEATH BENEFIT, AND I UNDERSTAND THE EFFECT OF THIS ELECTION. I FURTHER ACKNOWLEDGE MY SPOUSE'S DESIGNATION OF THE BENEFICIARY ON THE REVERSE SIDE OF THIS CARD, AND I UNDERSTAND THAT MY SPOUSE MAY NOT CHANGE THIS BENEFICIARY WITHOUT MY WRITTEN CONSENT.

Subscribed and sworn before me
this day of

Signature of Member's Spouse

Notary Public
My Commission Expires:

CERTIFICATION THAT MEMBER IS NOT MARRIED (Do not complete if you have a Spouse).

I hereby certify and represent that I am not married and will notify the Fund Office if I marry at a later date.

Subscribed and sworn before me
this day of

Signature of Member

Notary Public
My Commission Expires:

CARD 3
CONNECTICUT CARPENTERS ANNUITY FUND
SUMMARY OF PRE-RETIREMENT DEATH BENEFITS AND DESIGNATION OF BENEFICIARY
FOR REGULAR, VOLUNTARY AND ROLLOVER ACCOUNT(S)

Section A If you are

- (1) Married, and the value of your account(s) exceeds \$5,000, your spouse will receive a monthly annuity paid for your spouse's life. The amount will be determined by the balance in your account(s) at the time of your death. With the consent of your spouse you may elect, if you have reached age 35, to have your account(s) paid in a lump sum to your spouse or to some other beneficiary by completing Section B below and the Consent Form on the *reverse side*. If the value of your account(s) is under \$5,000 the value will be paid to your spouse in a lump sum.
- (2) Single, the value of your account will be paid to your beneficiary in a lump sum. Complete Section B below and the certification that you are not married on the reverse side.

Section B Check the appropriate box. You must check (a) or (b). If you select (b) and you are married, you must be at least age 35 and the Consent Form on the *reverse side* must be completed.

- (a) I wish to have my pre-retirement death benefit paid as a Husband and Wife survivor annuity if the value of my account exceeds \$5,000.
- (b) I wish to have my pre-retirement death benefit paid in the form of a lump sum.
Spouse or other person to receive pre-retirement death benefits:

Name of Spouse or other Beneficiary

Social Security #

Address of Beneficiary

Relationship

Date of Marriage

This Beneficiary Designation revokes all prior designations of beneficiary for the Connecticut Carpenters Annuity Fund. You may change your Beneficiary Designation and your election under Section B at any time prior to your retirement by completing a new Beneficiary Designation form.

If you have a spouse and do not make an election, and the value of your account(s) exceeds \$5,000, the Husband and Wife pre-retirement survivor annuity will be the automatic form of payment in the event of your death.

Date Social Security Number

Member's Signature

Member's Name (please print)



**CONNECTICUT CARPENTERS ANNUITY FUND
CONSENT FORM**

CONSENT OF SPOUSE (Must be completed if you have a spouse, have reached age 35, and have indicated that you wish to receive your pre-retirement death benefit in the form of a lump sum by electing (b) on the Election Form.)

I HEREBY CONSENT TO MY SPOUSE'S ELECTION TO WAIVE THE PRE-RETIREMENT HUSBAND AND WIFE SURVIVOR ANNUITY. I HAVE REVIEWED THE INFORMATION FURNISHED TO MY SPOUSE BY THE CONNECTICUT CARPENTERS ANNUITY FUND REGARDING THE EFFECT OF MY SPOUSE'S ELECTION TO WAIVE THE PRE-RETIREMENT HUSBAND AND WIFE SURVIVOR ANNUITY, AND I UNDERSTAND THE EFFECT OF THIS ELECTION. I CONSENT TO MY SPOUSE'S ELECTION OF THE PRE-RETIREMENT LUMP SUM FORM OF BENEFIT, AND I UNDERSTAND THE EFFECT OF THIS ELECTION. I FURTHER ACKNOWLEDGE MY SPOUSE'S DESIGNATION OF THE BENEFICIARY ON THE REVERSE SIDE OF THIS CARD, AND I UNDERSTAND THAT MY SPOUSE MAY NOT CHANGE THIS BENEFICIARY WITHOUT MY WRITTEN CONSENT.

Subscribed and sworn before me
this _____ day of _____

Signature of Member's Spouse

Notary Public
My Commission Expires:

CERTIFICATION THAT MEMBER IS NOT MARRIED (Do not complete if you have a Spouse).

I hereby certify and represent that I am not married and will notify the Fund Office if I marry at a later date.

Subscribed and sworn before me
this _____ day of _____

Signature of Member

Notary Public
My Commission Expires: