



# UNITED ASSOCIATION OF JOURNEYMAN AND APPRENTICES OKLAHOMA STATE PIPE TRADES ANNUITY FUND



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## Section 1- Personal Information

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First Middle Initial

Home Address: \_\_\_\_\_  
Street Address City State Zip

Home Local Union #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month Day Year

## Section II: - Beneficiary Designation

I hereby designate the following person(s) who survive me as my beneficiary(ies) to receive the account balance upon my death.

_____	_____	_____
Name	Social Security Number	Date of Birth
_____	_____	_____
Name	Social Security Number	Date of Birth
_____	_____	_____
Name	Social Security Number	Date of Birth
_____	_____	_____
Name	Social Security Number	Date of Birth

**Note: If you are married and name someone other than your spouse as your beneficiary, the law requires your spouse to sign the following section of this form before a Notary Public.**

## Section III: - Consent of Spouse

I hereby agree to the above beneficiary designation and waive my rights to be sole beneficiary. By this waiver, I understand that the beneficiary will be the person(s) or the entity named above. I also understand that this beneficiary designation is not valid unless I consent to it and that my consent to naming of the above beneficiary(ies) is irrevocable.

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

State of: \_\_\_\_\_ County of: \_\_\_\_\_

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me came \_\_\_\_\_  
to me known and known to me to be the person described above and who executed the foregoing statement that he/she acknowledge to me that he/she executed the same.

\_\_\_\_\_  
Notary Public Commission Expiration Date

## Section VI: - Authorization

The authorization hereby granted by this form is effective as of the date signed and will remain in effect until I complete and submit a new change form.

**Note:** The "T ROW PRICE TARGET DATE FUND BASE OFF OF DATE OF BIRTH" option will hold the assets in your account until you direct your account to another option that you have selected. The phone number for the Participant Directed Investments is 1- 800-294-3575. Please mail beneficiary form back to Oklahoma State Pipe Trades Annuity Fund, 2908 N. Harvard Ave., Tulsa, OK 74115.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_