entity(ies) who will receive the funds	print the designation next to t	he name of each prim	ary beneficiary (co	nsult with your estate plannin	g attorney before inc	dicating this option).
upon the death of all account owners.	Name of beneficiary (first, middle initial, last) or entity Mailing address			Name of beneficiary (first, middle initial, last) or entity Mailing address		
To name additional primary beneficiaries,						
include all information in this section on a separate sheet.	City	State	ZIP code	City	Stati	e ZIP code
	Beneficiary's Social Security/taxpayer ID number			Beneficiary's Social Security/taxpayer ID number		
S SECONDARY B	Date of birth (mm/dd/yyyy) R	Relationship	Percentage 96	Date of birth (mm/dd/yyyy)	Relationship	Percentage
Secondary beneficiary: Individual(s) or entity(ies) who will receive the funds	Beneficiary(ies) must be designated by name and the sum of the percentages for all secondary beneficiaries must equal 100%. Unless noted, we will assume equal distribution among secondary beneficiaries. To establish designations of lineal descendants or lineal descendants per stirpes, print the designation next to the name of each secondary beneficiary (consult with your estate planning attorney before indicating this option).					
upon the death of all account owners if all	Name of beneficiary (first, middle initial, last) or entity			Name of beneficiary (first, middle initial, last) or entity		
primary beneficiaries						

account owners.