

SAN DIEGO ELECTRICAL ANNUITY PLAN

IMPORTANT NOTICE
REGARDING DESIGNATION OF BENEFICIARY

To the Employee: Federal law requires that if you are married, benefits payable under the Plan by reason of your death must be paid to your surviving spouse. However, you have the right to designate a beneficiary other than your spouse, provided your spouse consents, in writing, to the designation.

To the Employee's Spouse: If your spouse designates someone other than you as primary beneficiary, the designation will only be effective if you agree to the designation by signing the Spouse's Consent below and it is witnessed by a notary public.

EMPLOYEE'S DESIGNATION OF BENEFICIARY

Employee Last First Middle

Sex: Male Female SSN#: Marital Status Home Telephone

I hereby designate the following individual or individuals as my beneficiary or beneficiaries under the San Diego Electrical Annuity Plan, and I hereby revoke any beneficiary designations previously made by me.

Primary Beneficiary Last First Middle

Soc. Sec. #: Birth Date: Relationship to Employee:

Contingent Beneficiary Last First Middle

Soc. Sec. #: Birth Date: Relationship to Employee:

Contingent Beneficiary Last First Middle

Soc. Sec. #: Birth Date: Relationship to Employee:

Signature of Employee Date

SPOUSE'S CONSENT IS REQUIRED IF THE PARTICIPANT DESIGNATES SOMEONE OTHER THAN HIS OR HER SPOUSE AS THE PRIMARY BENEFICIARY. SPOUSE'S CONSENT

I consent to my spouse's designation of the beneficiary or beneficiaries named above. I understand and agree that, unless I am named as my spouse's primary beneficiary above, I am hereby waiving and relinquishing important survivor benefits under the Plan.

Signature of Employee's Spouse Date

SUBSCRIBED AND SWORN to before me this day of, in the year.

NOTARY PUBLIC/PLAN REPRESENTATIVE in and for the State of My Commission Expires:

PLEASE SEND COMPLETED FORM TO: COAST BENEFITS 3444 Camino del Rio North #106 San Diego, CA 92108