

MINNESOTA LIFE

EMPLOYEE GROUP INSURANCE CHANGE REQUEST

Minnesota Life Insurance Company • Employer Plans • 400 Robert Street North • St. Paul, Minnesota 55101-2098

NAME OF INSURED EMPLOYEE	GROUP POLICY NUMBER
NAME OF EMPLOYER	UNIT NUMBER (if applicable)

I HEREBY REQUEST MINNESOTA LIFE INSURANCE COMPANY TO:
(CHECK AND COMPLETE APPROPRIATE ITEMS BELOW)

I CHANGE MY BENEFICIARY TO (Revoking all prior designations)

NAME OF NEW BENEFICIARY-Give first name if married woman	RELATIONSHIP

If more than one beneficiary is designated, settlement will be made in equal shares to those that survive, unless otherwise provided herein.
"Children" used without modification, includes only lawful bodily issue of the first generation and legally adopted children.

CHANGE OF NAME

FORMER NAME OF INSURED	REASON FOR CHANGE (Marriage, Court Order, etc.)

RECORD A CHANGE IN DEPENDENT STATUS

TERMINATE DEPENDENT COVERAGE EFFECTIVE _____

ADD DEPENDENT COVERAGE EFFECTIVE _____

THE CHANGE RESULTS FROM

MARRIAGE DATE OF MARRIAGE _____

BIRTH OR ADOPTION OF CHILD DATE ACQUIRED _____

Issue to me a duplicate of the above stated certificate. I have made a thorough search for it and it cannot be found. I have not assigned the certificate or any of its benefits. I agree that if the original certificate is found at any future date, I will return it to Minnesota Life Insurance Company for cancellation. In consideration of issuance of such duplicate certificate, I hereby release Minnesota Life Insurance Company from any obligation under the original certificate.

INSURED'S SIGNATURE X	DATE
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Minnesota Life will send confirmation of the above requested changes. We may also send you additional forms to be completed before your change request can be processed. Minnesota Life shall incur no obligation because of any of the above request(s) unless we have approved the requested change(s) in our home office.

Send to : Minnesota Life
Employer Plans Dept B2-4930
400 Robert Street North
St. Paul, MN 55101-2098

FOR INSURANCE COMPANY USE ONLY	
RECORDED BY	
DATE	



1-800-252-5152
Locally (651) 665-4930 or 665-7962