



BI-STATE DEVELOPMENT

BENEFICIARY DESIGNATION FORM FOR MISCELLANEOUS PAYMENTS

Upon my death and after Bi-State Development is provided with proof of my death, I direct that all miscellaneous payments* due me other than those specific benefits for which I have a designated beneficiary on file at the time of my death shall be paid to:

Name of Beneficiary(ies) – List Percentage Adding to 100% if Multiple

Relationship(s)

Social Security Number(s)

Address(es)

City

State

Zip

Phone/Email Contact(s)

If no beneficiary survives me, I direct Bi-State Development to distribute all monies to the personal representative of my estate.

In making the above distributions, Bi-State Development may rely on information contained in my personnel record in order to determine the names of my spouse, children and parents. I understand that it is my obligation to keep such information current.

Any payment made in accordance with my directions listed above shall release Bi-State Development from any further liability for the amount paid.

EMPLOYEE SIGNATURE

Social Security Number

Print Name

Badge Number

Date

*Miscellaneous payments = vacation, sick days, applicable uniform/tool allowances, etc.