WCU FINANCIAL
ESTABLISHED IN 1877
FAITH | STRENGTH | SECURITY

Western Catholic Union
A Fraternal Benefit Society
510 Maine St, Quincy, IL 62301
217-223-9721 • Fax: 217-223-9726
www.wculife.org

BENEFICIARY CHANGE

Owner: _____

Annuitant/Insured (if other than owner): _____

Certificate(s): _____

PRIMARY BENEFICIARY

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

CONTINGENT BENEFICIARY

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

NOTE: SHARE % MUST EQUAL 100%. IF SHARE % IS NOT SPECIFIED, PAYMENTS WILL BE MADE IN EQUAL SHARES.

CONTINGENT BENEFICIARY (CONTINUED)

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

Name: _____ DOB: _____

Address: _____

Relationship to Insured: _____ SSN: _____ Share: _____%

Per Stirpes: ☐ No ☐ Yes *(If the beneficiary predeceases you, their portion will be split equally between their heirs)*

NOTE: SHARE % MUST EQUAL 100%. IF SHARE % IS NOT SPECIFIED, PAYMENTS WILL BE MADE IN EQUAL SHARES.

COMMUNITY PROPERY STATE CONSENT

For residents of AZ, CA, ID, LA, NV, NM, TX, WA, or WI: If you are married and live in a community property state and name someone other than your spouse as beneficiary, your spouse is required to sign below to waive their rights to any community property interest in the benefit.

As the Insured's spouse, I do hereby consent to the beneficiary designation indicated on this form and waive any rights that I may have to the proceeds of such insurance under applicable community property laws.

Signature of Spouse: _____ Date: _____

REQUIRED DOCUMENTATION

If a trust is being named as beneficiary, please provide a certification of trust OR a copy of the trust pages that include the name of the trust, name of the trustee(s) and successor trustee(s), the tax id number and the signature page(s).

SIGNATURES (MUST BE WITNESSED BY THE WCU AGENT OF RECORD OR NOTARIZED TO BE CONSIDERED VALID)

It is hereby agreed that the changes requested above shall not become effective unless and until this request is received by Western Catholic Union. All prior beneficiary designations are then revoked.

_____ _____

Owner's Signature | Joint Owner's Signature (if applicable)

Date Signed: _____ Date Signed: _____

NOTARY WITNESS:

State of _____ County of _____ State of _____ County of _____

Acknowledged before me on this date of _____ Acknowledged before me on this date of _____

_____ _____

Notary Signature | Notary Signature

NOTARY STAMP: **NOTARY STAMP:**

AGENT WITNESS: (INSTEAD OF NOTARY)

As the WCU Agent of Record for this client, I hereby waive the notarized signature requirement and attest that I personally witnessed the above policy owner(s) signatures.

_____ _____

Agent of Record Printed Name | Agent of Record Signature