SOUTHERN PAINTERS WELFARE FUND

BENEFICIARY DESIGNATION FORM	Print Full Name	Print Full Name ———————————————————————————————————		
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	Marital Status	Single	MarriedDivorced	
rimary Beneficiary: Name:			Soc. Sec. No	
(Last)	(First)	(Middle)	Relationship	
Address:			Date of Birth	
(No. & Street)	(City) (State)	(Zip)		
econdary Beneficiary: Name:			Soc. Sec. No	
(Last)	(First)	(Middle)	Relationship	
ddress:			Date of Birth	
(No. & Street)	(City) (State)	(Zip)		
hereby designate the above as my beneficiaries lesignations.	for the death benefit under tl	ne Southern Painte	rs Welfare Fund and revoke all prior benef	
Date:				
	(Participant's Signature)			

General: Use this Form to designate a beneficiary or beneficiaries to receive the death benefit payable under the Southern Painters Welfare Fund. An explanation is in the Southern Painters Welfare Fund Plan Description.

The death benefit will be paid to your Primary Beneficiary only if living at your death. If the Primary Beneficiary dies before you, the death benefit will be paid to your Secondary Beneficiary if living at your death. If no Beneficiary is alive at your death, the death benefit will be paid as provided by the terms of the Southern Painters Welfare Fund.

Additional Beneficiaries: If you want to designate more than one Primary and/or Secondary Beneficiary, attach a sheet of paper with the information requested on the other side of this Form for Primary and/or Secondary Beneficiary(ies) and sign and date the sheet. If you designate more than one Primary Beneficiary, no amount will be paid to any Secondary Beneficiary unless all of the Primary Beneficiaries die before you.

If you designate more than one Primary Beneficiary, they (if surviving) at your death will receive equal shares of the death benefit unless you specify different percentages. Similarly, if you designate more than one Secondary Beneficiary and all designated Primary Beneficiaries die before you, the surviving Secondary Beneficiaries will receive equal shares of the death benefit unless you specify different percentages. In each case, if one of the designated Beneficiaries does not survive you, the deceased Beneficiary's share will be allocated among the surviving Beneficiaries (in the same group) in proportion to the percentages you specified for the surviving Beneficiaries (unless you later change your beneficiary designation).

Filing With The Fund Office: The Beneficiary Designation Form should be filed with the Fund Office. Once filed, it will revoke all prior beneficiary designation for the death benefit payable under the Southern Painters Welfare Fund. It will remain in effect until changed by you by filing another Beneficiary Designation Form with the Fund Office.