



INSTRUCTIONS FOR CHANGING BENEFICIARYS ON YOUR POLICY:

To change Beneficiary(s) on your policy, you must complete a Change of Beneficiary Endorsement Form. The primary beneficiary(s) will receive the benefits from your policy in the event of your death. The contingent beneficiary(s) will receive benefits from your policy only if the primary beneficiary(s) are also deceased. Your policy does not *require* you to name a contingent beneficiary, but you may do so if you wish.

You must have a witness sign the form. The witness can be any adult such as a neighbor, friend or family member, as long as it is not a person you designate as one of your beneficiaries. You will need to fill in the portion regarding where and when it was signed, such as, "Dated at (my home) this (13th) day of (January) 20 (15)". Please remember to sign the form above "Owner".

Be sure to keep a copy of your Beneficiary Change for your records. Return your completed form by faxing it to 701-235-9528 or mail it to Surety Life and Casualty 827 28th St. S Suite C; Fargo, ND 58103.

You may contact our office at 701-235-6653 or toll free by dialing 1-800-232-3979 in the event you have questions regarding your beneficiary change.

SURETY LIFE AND CASUALTY INSURANCE COMPANY

827 28TH STREET SW, SUITE C FARGO, ND 58103 USA

TEL {701} 235-6653 TOLL FREE 1-800-232-3979 FAX {701} 235-9528

SURETY LIFE AND CASUALTY INSURANCE COMPANY

827 28th St. South Suite C
Fargo, North Dakota 58103

CHANGE OF BENEFICIARY ENDORSEMENT

I, the undersigned _____ of _____,
the insured under policy number(s) _____,
_____, _____,
_____, issued by the SURETY LIFE AND CASUALTY INSURANCE

COMPANY, hereby revoke the appointment of any existing beneficiary, and direct that

X _____
my **X** _____ shall be the primary beneficiary under the
above named policy.

If the policy requires a contingent beneficiary, I direct that **X** _____

my **X** _____ shall be the contingent beneficiary under
such policy.

Dated at **X** _____ this **X** _____ day of **X** _____ 20 _____

X _____
Owner's Signature

X _____
Witness Signature

X _____
Owner's Printed Name

X _____
Witness Printed Name