# DEATH INSURANCE BENEFICIARY DESIGNATION FORM

CONFIDENTIAL



This form only needs to be completed by the insurance holder in the event the holder wants to designate a different beneficiary (or several) from the one (s) mentioned within the contractual provisions of the high risk provident scheme subscribed in the holder's name by his employer.

Contractual provisions are summarized on the back of the present form.

If you want to change the designated beneficiary, or several, please fill in this form.

You should explicitly designate your beneficiary by completing this form and sending it dated and signed to the address provided below. Your beneficiary can also be designated by a private, authenticated deed.

Your designation becomes final if it is accepted in writing by the beneficiary.

If you have submitted this form before, the present document will replace it.



In the event of death, your beneficiary can choose one of the three options provided. Your designated beneficiary may profit from either: • contractual attribution,

• or from the particular designation you will have decided.

Your beneficiary (or several) can activate the option deemed as the most appropriate.

### **COMPLETION BY HOLDER**

ime and surname:	
aiden name (married women only):	
Place of birth	
cial Security n°:	
ldress:	
st code	
mily situation: $\Box$ single $\Box$ Married $\Box$ Widow $\Box$ Divorced $\Box$ Separated $\Box$ Civil union $\Box$ common-law	
ime and address of present employer:	
nployer's SIREN number (mandatory): (employer's SIREN number figures on your pay slip)	

I, the undersigned, designate the following person(s) as beneficiary(s) of the collective death insurance subscribed by my present employer:

DONE										
DATE										
Signa	ture,	pre	ced	ed b	oy «r	ead	and	l app	orov	ed»

DONE IN

#### RECOMMANDATIONS

We draw your attention to the fact that person(s) expressly designated on the present form will benefit from the provisions of death insurance. Consequently, it is necessary to precisely identify the person(s) concerned by indicating their name, surname, date and place of birth, family relation or name and address in the case of an institutional beneficiary.

We recommend to designate several successive beneficiaries « by default »: (Mr. X, if not, Mrs. Y, if not, ...).

In the case of a single designated beneficiary dying before the policy holder, the capital will be distributed according to contractual order. If you wish to indicate several beneficiaries, you need to indicate the percentage of attribution for each of them (Mr. X at 60 %, Mrs. Y at 40 %) or indicate « equal parts ».

In the case of a change in family situation (marriage, separation, divorce, cohabitation, birth of a child), it is necessary to update your designation. The most recent act cancels any previous designation.

Please call + 33 1 56 06 26 40 should you need any further information.

# WHERE TO SEND THIS FORM

In order to guarantee that KLESIA receives this document and to ensure total confidentiality of information therein, we strongly recommend you send it by registered post, exclusively to the following address:

#### KLESIA - BASE IMAGE BIA 1-13 RUE DENISE BUISSON 93554 MONTREUIL CEDEX

Please note that no provisions are made for acknowledgement of receipt (registered post slip is the sole proof of transmission).



# SUMMARY OF CONTRACTUAL PROVISIONS

In the case of absence of a designated beneficiary (or several), the following KLESIA contract beneficiary delegations will apply:

- → Surviving, non-legally separated partner. Partner being a married person or a person linked to the employee by a civil union;;
- → Surviving partner. Partner being a person who satisfies the following criteria:
  - Living in the same household as the participant,
  - Not linked by marital or civil union ties,
  - The Participant being equally free of any marital or civil union ties.
  - Partnership of at least two concurrent years that can be justified by legally acceptable documents (this does not apply if a child is born to the couple);
- → By default, employee's children, living or represented, in equal parts;
- → By default, employee's ascendants in equal parts;
- → By default, employee's legal heirs.

In the event the designated beneficiary (or several) should die before the policy holder, the amount due will be attributed according to contractual order detailed above.

However, if you want to designate another beneficiary, you can modify your initial decision anytime by completing the present form and sending the signed document to KLESIA.

#### If you want to alter the previous designation, this document should be sent to the address specified on the front page.

Please note that in the case you nominate a particular beneficiary (or several) and your intended beneficiary (or several) agree to the request, it is impossible to subsequently modify the beneficiary clause without their written agreement.

Furthermore, please note that bank loans can be guaranteed by death cover equity of the new provident fund, subject to the bank's agreement. This type of operation requires a specific approach: the form to be filled is available on the **www.klesia-schneider-electric-prevoyance.fr** website.