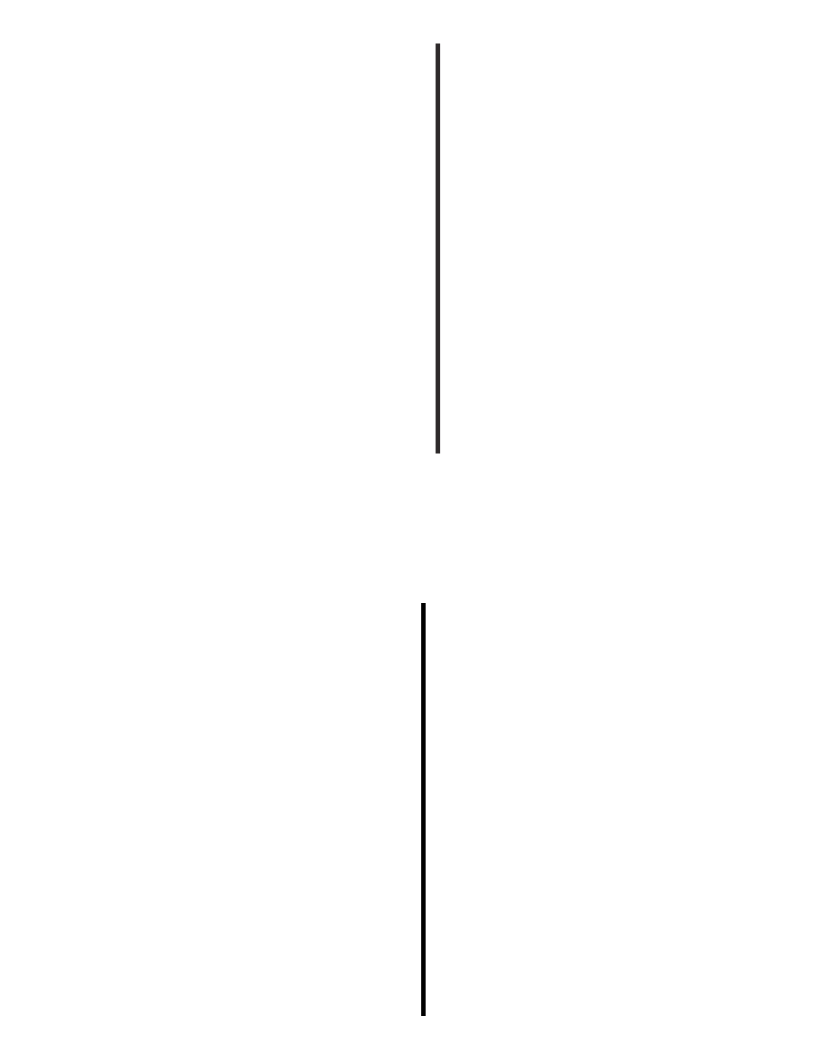


**ENROLLMENT DATES HERE**

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**ENROLLMENT DATES HERE**

1. **BE READY TO DESIGNATE BENEFICIARIES**

YOU WILL NEED THE NAME(S) AND DATE(S) OF BIRTH FOR ALL BENEFICIARIES

1. **HAVE DEPENDENT SOCIAL SECURITY NUMBERS HANDY FOR ANY DEPENDENT(S) YOU WISH TO ADD TO A PLAN**

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