



The FRATERNAL ORDER OF POLICE
Maryland-National Capital Park Police Lodge 30, Inc.
 6411 Ivy Lane #310 Greenbelt, Maryland 20770
 Office (301) 780-3500 Fax (301) 780-3100
 "Serving Montgomery and Prince George's Counties Since 1973"

Medical Life Insurance Company
Change Request to be completed by employee

Employee's Name as it appears on MLI Records **Social Security Number**

Last First M.I. _____

Employer _____ MLI Group Number
G17564

Change of Beneficiary: This designation replaces any other beneficiary designation I may have previously made for my insurance under Group Policy. Unless otherwise noted, if two or more beneficiaries are named, proceeds will be paid in equal shares to the named beneficiaries who survive the insured.

<u>First Name</u>	<u>Last Name</u>	<u>Social Security #</u>	<u>DOB</u>	<u>Relationship</u>	<u>Benefit %</u>
<u>Primary</u>					
<u>Primary</u>					
<u>Contingent</u>					
<u>Contingent</u>					

Change my name to: _____ Effective Date of Change _____

Reason: Marriage Divorce Other

Warning: Any person, who, with intent to defraud or knowingly that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud. (Ohio Revised Code Section 3999.21)

Employee's Signature

Date