

4. SIGNATURE AND NOTARIZATION

This section must be signed in the presence of a notary public.

I understand that I may change beneficiaries by proper notice to the Fund, and that keeping my beneficiary designation up-to-date is my responsibility. I hereby certify that the foregoing information is true to the best of my knowledge and belief.

PARTICIPANT SIGNS

_____ Today's Date ____/____/____

NOTARY SEAL:

NOTARY PUBLIC AS WITNESS:

Subscribed and sworn before me this ____ day of _____, 20 __

NOTARY SIGNS

State of _____

My Commission Expires _____