

Please provide the name, social security number and address of all surviving (birth-related) children of the participant so named on page one.

NAME SS#

ADDRESS (STREET AND NUMBER) CITY STATE ZIP CODE

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[Please attach a separate sheet of paper to list additional surviving children].

INSTRUCTIONS FOR FURNISHING PROOF OF AGE

Please submit with this completed application a copy of your birth certificate or other documents that provide proof of age for both you and your spouse.

Submit either one document listed under Group I or two documents listed under Group II. Photo-static copies are acceptable except for passports, naturalization papers or immigration papers which may not be photocopied by federal law. If you submit any original documents, they will be returned to you.

Additional proof of age may be requested if the documents you submit do not provide conclusive proof of your date of birth.

Group I (one required)

1. Birth Certificate
2. Infant Baptismal Certificate
3. Any governmental agency record of birth certified by the custodian of such record
4. Hospital Birth Record
5. Naturalization Record (submit original)
6. Immigration papers (submit original)

Or,

Group II (two required)

7. Military Records
8. Passport at least 10 years old (submit original)
9. School records, certified by custodian of such record
10. Insurance policy which shows age or date of birth (at least 10 years old)
11. Marriage records showing age or date of birth
12. Notarized affidavits by persons who have knowledge of your date of birth