## **Beneficiary Designation**

## Securian Life Insurance Company Minnesota Life Insurance Company



## **INSTRUCTIONS**

- 1. Clearly print or type the information.
- 2. Sign and date the completed form.
- 3. Submit to the Benefits Office: Fax: 513-529-4223

Email: benefits@MiamiOH.edu

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## **Beneficiary Designation** Securian Life Innsignation Basic Life Basic Accidental Death Voluntary Life Voluntary Accidental Death