



Local 53 • 1918 West Burbank Boulevard • Burbank, California 91506 • (818) 846-0490
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NABET-CWA LOCAL 53 DEATH BENEFIT

NAME OF MEMBER (Please Print)

EMPLOYER

STREET ADDRESS (Please Print)

CITY, STATE, & ZIP CODE

DATE

DATE OF BIRTH

The Local 53 Death Benefit May Not Be Assigned To A Trust You Must Select A Beneficiary.

BENEFICIARY (Please Print)

RELATIONSHIP

ADDRESS OF BENEFICIARY

CITY, STATE & ZIP CODE

TELEPHONE NUMBER

E-MAIL ADDRESS

SUCCESSOR BENEFICIARY

RELATIONSHIP

ADDRESS OF SECESSOR BENEFICIARY

CITY, STATE & ZIP CODE

TELEPHONE NUMBER

E-MAIL ADDRESS

BENEFICIARY STATEMENT

This statement is made in accordance with and subject to the conditions, rules, regulations and procedures pertaining to the "Death Benefit" as adopted by the Executive Board of National Association of Broadcast Employees and Technicians, AFL-CIO, Local 53.

SIGNATURE OF MEMBER

WITNESS TO SIGNATURE

REMEMBER - IT IS YOUR OBLIGATION TO UPDATE THIS FORM WHENEVER NECESSARY.