



Life/Accidental Death Beneficiary Card

Unum Life Insurance Company of America, Portland, ME 04122

Policy/Division Number

Insured's Name	Birthdate	Social Security Number	
Beneficiary*	____/____/____	Social Security Number	Relationship
Beneficiary*	% of Benefit	Social Security Number	Relationship
Beneficiary*	% of Benefit	Social Security Number	Relationship
Contingent Beneficiary* (used only if the above beneficiary dies before you do)			
Insured's Signature		Date	

*Benefits cannot be sent directly to a minor. Please consult your policy for additional information.