

Underwritten by Dearborn National® Life Insurance Company

Phone: (800) 778-2281 | Fax: (855) 645-8242

## Life Insurance Claim Form

Return to: Dearborn National Attention: Claims Department P.O. Box 7070, Downers Grove, IL 60515

## Part 2: To be completed by Beneficiary

If there is more than one beneficiary, each must complete a separate form. See Important Information below if beneficiary is a minor.

Beneficiary Information			
Last Name:	First:		Middle:
Maiden Name:	Birth date:	Employee SSN	I / ID:
Street:			
City:	State:	Zip:	
Phone Number:	Email Address:		
Relationship to Deceased:			
IRS Certification			
Are you a U.S. Citizen: ☐ Yes ☐ No, IRS Form W-8 is required. Provide other work ID if available.			
<ul> <li>Under penalty of perjury, I certify that:</li> <li>1. The number shown on this form is my correct Social Security/Taxpayer Identification number; and</li> <li>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS notified me that I am no longer subject to backup withholding; and</li> <li>3. I am a U.S. citizen or other U.S. person.</li> </ul> Certification Instructions			
You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of under reporting interest or dividends on your tax return.			
The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. If you fail to certify, we may be required to withhold federal and state tax.			
Be sure to include a certified copy of the Death Certificate for claims over \$100,000.			
I certify that I have read this document and the information is accurate and complete. I understand that any person who knowingly files a statement of claim containing any false or misleading information may be subject to criminal and civil penalties.			
Signature of Beneficiary		Date	е

## IMPORTANT INFORMATION

## If the Beneficiary is:

- a. A minor, an estate or incompetent to handle financial matters: provide an original court order appointing a legal representative or quardian to handle the financial affairs of the minor, the estate, or the incompetent.
- b. **Deceased:** provide proof of death, a copy of the final certified death certificate, and documentation of the secondary beneficiary.
- c. A trust: provide documentation verifying existence of the trust, documentation that the trust has been named the beneficiary, and the tax identification number of the trust.

Each beneficiary must complete and sign the Beneficiary/Claimant Statement.