NEAP Life Stage Investment Change Form

National Electrical Annuity Plan

First Name _____ MI _____

Last Name _____

Date of Birth (MM/DD/YYYY) _____ Social Security Number _____

Choose either the Automatic Life Stage Program or one (1) of the Life Stage Funds by checking a box below.

Default Life Stage Program:

☐ Automatic Life Stage Fund

OR

Select <u>one (1)</u> Life Stage Fund:

☐ Life Stage Fund – Under 30s
☐ Life Stage Fund – 30s
☐ Life Stage Fund – 40s
☐ Life Stage Fund – 50s
☐ Life Stage Fund – 60s+

Participant's Signature _____ Date (MM/DD/YYYY) _____

Phone Number _____ Email Address _____

Address Line 1 _____

Address Line 2 (if needed) _____

City _____ State _____ Zip Code _____

You can review additional information about the Life Stage Funds Program at www.neap.org.

Please upload your completed form to your NEAP Benefits Portal account or mail it to the NEAP Benefit Office at:

National Electrical Annuity Plan
2400 Research Boulevard, Suite 500
Rockville, MD 20850