



# Spousal Consent To Waiver As Primary Beneficiary Form

## NORTHERN MARIANA ISLANDS RETIREMENT FUND DEFINED CONTRIBUTION PLAN

**If you and your spouse agree to name someone other than your spouse as the Primary Beneficiary, your spouse must complete this section.**

Participant: \_\_\_\_\_ SS#: \_\_\_\_\_

Spouse: \_\_\_\_\_ SS#: \_\_\_\_\_

I hereby acknowledge that I am the spouse of the participant identified above, and I hereby consent to the payment of my spouse's death benefit to the beneficiary determined on the Beneficiary Designation Form and consent to the payment of such benefit according to any method of payment the beneficiary elects under the Plan. Any change in a designated beneficiary will require my consent. I understand that: (1) as a result of this consent, I am forgoing benefits I would be entitled to receive upon my spouse's death prior to retirement; (2) I do not have to consent to my spouse's waiver of the payment of his/her death benefit to me, and my spouse's waiver is not valid without my consent; (3) I have the right to limit this consent to a specific form of benefit payment to the beneficiary, but I am voluntarily relinquishing this right; and (4) this consent is irrevocable. I hereby make this consent freely and without any duress or undue influence by any party. I understand that I have the right to seek independent advice and counsel with respect to this consent.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Participant's Spouse Signature Date

### A C K N O W L E D G M E N T

In and for Commonwealth of Northern Mariana Islands, U.S.A. )  
 )ss  
City of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public in and for CNMI, personally appeared \_\_\_\_\_, known to me and/or proved to me through identification documents allowed by law, which were \_\_\_\_\_, to be the person whose name is signed on the Spousal Consent To Waiver As Primary Beneficiary Form, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year first above written.

\_\_\_\_\_  
Notary Public