

INSTRUCTIONS FOR COMPLETING A SPOUSE'S CONSENT TO WAIVER OF
BENEFICIARY FOR A J&S PLAN

If your plan's investment platform provides Application/Enrollment Forms and Beneficiary Designation Forms, you should use their provided forms. If their Beneficiary Form does not include a spousal consent section (to name a beneficiary other than your spouse), please call IBI to determine which Spousal Consent Form to use for your plan. Print the appropriate form to attach it to the Beneficiary Form:

EMPLOYER: Please fill in the plan name, the employee's name and social security number. The Employee should complete the rest of the form and return it to you. Please keep this form on file at your office.

EMPLOYEE:

Date, Witness, Participant's Signature - Please date and sign the form and have your signature witnessed. **Anyone** can be the witness.

Date, Spouse's Signature and Witness - Please have the participant's spouse date and sign the form. **The spouse's signature must be Notarized.**

SPOUSE'S CONSENT TO WAIVER OF BENEFICIARY FOR A J&S PLAN

Name of Plan: _____
Participant: _____ Social Security Number: _____

NOTICE OF PRE-RETIREMENT SURVIVOR ANNUITY

As a Participant in the above-named plan, the law requires that you be informed as to the disposition of your plan benefits upon your death before retirement.

In the case of your death before retirement, the Plan will use 100% of your Account Balance (or Accrued Benefit) to purchase a survivor annuity for your spouse. This annuity form of payment will provide your spouse with a series of monthly payments over his or her life, and will contain other appropriate annuity options.

However, beginning with the first day of the Plan Year in which you attain age 35 (or upon termination if you are under age 35), you may elect to waive either (a) the requirement that your death benefit be paid in the form of a survivor annuity, or (b) the requirement that your spouse be your beneficiary. You may elect to waive both requirements.

However, your spouse must consent in writing before a plan representative or notary public to any waiver that you elect. You may revoke any waiver any time before your death, and, if you desire, make a new election.

If you elect to waive both the survivor annuity form of payment and your spouse as your beneficiary (and your spouse has consented to both), then you may designate a beneficiary of your choosing. Also, if you are not married at the time of your death, the death benefit will be paid to your designated beneficiary.

It is important that you and your spouse understand your rights and obligations concerning your death benefit. You should direct any questions to the Administrator. Also, because a spouse has certain rights to the death benefit, you should immediately inform the Administrator of any change in your marital status.

ELECTION TO WAIVE PRE-RETIREMENT SURVIVOR ANNUITY

As a Participant in the Plan, I hereby acknowledge that I have been informed by the Administrator that if I should die prior to my retirement, my spouse and I have the right to have the death benefit under the Plan paid to my spouse in the form of an annuity over the life of my spouse; that I have the right to waive that form of payment, provided that my spouse consents to the waiver; that I have the right to waive the designation of my spouse as the sole direct beneficiary of my death benefit, provided that my spouse consents to such waiver; and that I have the right to revoke either of such waivers which may be made by me at any time without my spouse's consent. I further understand that if my marital status changes before my benefits commence under this plan any optional elections I have executed will no longer be effective without the written consent of my spouse to whom I am married at the time when benefits commence.

I hereby elect to waive the right to have my pre-retirement death benefit under the Plan paid to my spouse in the form of a Pre-Retirement Survivor Annuity and I elect to waive the right to have my spouse be the sole direct beneficiary of my pre-retirement death benefit.

Date _____

Witness

Participant's Signature

SPOUSE'S CONSENT TO WAIVER

I hereby consent to the foregoing election by my spouse to waive the Pre-Retirement Survivor Annuity form of death benefit that is payable under the Plan, and/or to the designation made by my spouse to have the pre-retirement death benefit paid to the named beneficiary specified in the foregoing election. The Pre-Retirement Survivor Annuity death benefit has been explained to me, and I hereby acknowledge that I understand: (1) that the effect of such designation may cause my spouse's death benefit to be paid to a beneficiary other than me; (2) that each beneficiary designation is not valid unless I consent to it; and (3) that my consent is irrevocable unless my spouse revokes the beneficiary designation.

Date: _____ (Spouse's Signature)

STATE OF _____)
)SS:
COUNTY OF _____)

Before me, a Notary Public, for _____ County, State of _____, personally appeared _____ and acknowledged the execution of this instrument this _____ day of _____, 20____.

(SEAL) Signature: _____
Notary Public

Notary Public - Name Printed

My Commission Expires: _____

THE SPOUSE'S SIGNATURE MUST BE NOTARIZED.