



John Hancock Safe Access Account

Beneficiary Designation Card

I elect the following beneficiary(ies) with respect to the proceeds in my John Hancock Safe Access Account, still reserving the privilege of changing this election by written notice. All prior beneficiary designations, if any, are hereby revoked. If more than one beneficiary is designated, settlement will be made in equal shares to each of the designated beneficiaries that survive me. If no designated beneficiary survives me, payment will be made to my estate.

(PLEASE PRINT)

1 Name: _____ Relationship: _____
 Address: _____
 Social Security number: _____ Date of birth: ____ / ____ / ____ Phone number: _____
mm dd yyyy

2 Name: _____ Relationship: _____
 Address: _____
 Social Security number: _____ Date of birth: ____ / ____ / ____ Phone number: _____
mm dd yyyy

3 Name: _____ Relationship: _____
 Address: _____
 Social Security number: _____ Date of birth: ____ / ____ / ____ Phone number: _____
mm dd yyyy

Name _____ Account # _____

Signature _____ Date _____

- 1 You may change your designation(s) at a future date. Please call 1-800-248-6110 for information on updating your designation(s).
- 2 Your beneficiary designation is not effective until received and recorded by John Hancock. When received and recorded, it becomes retroactive to the date the designation was signed.
- 3 This designation shall be invalid if the person making it does not have the right to change the beneficiary under this account.

FOR OFFICE USE ONLY.

Acknowledged by John Hancock _____ Date _____

PLEASE FILL OUT THIS CARD AND EITHER FAX US AT 617-572-5007, OR MAIL TO:

**JOHN HANCOCK SAFE ACCESS ACCOUNT, C-5
P.O. BOX 790
BOSTON, MA 02117-0790**