

# SPOUSAL CONSENT

TO ACCOUNT HOLDER'S BENEFICIARY DESIGNATION



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## 1. ACCOUNT HOLDER INFORMATION

Account Holder Name:

New Direction Account Number:

## 2. SPOUSAL CONSENT

### REQUIRED ONLY IF YOUR SPOUSE IS NOT YOUR PRIMARY BENEFICIARY

The consent of the spouse must be signed only if all of the following conditions are present; the account holder's spouse is living, the account holder's spouse is not the sole Primary Beneficiary named to the account and the account holder and spouse are residents of a community property state (AZ, CA, ID, LA, NM, NV, TX, WA or WI).

I am the spouse of the account holder listed above. I hereby certify that I have reviewed the Designation of Beneficiary Form and I understand that I have a property interest in the account. I hereby acknowledge and consent to the above designation of beneficiary other than, or in addition to, myself as primary beneficiary. I further acknowledge that I am waiving part or all of my rights to receive benefits under this plan when my spouse dies. By signing below, I hereby consent to the above beneficiary designation.

Spouse Signature:

Date Signed:

Spouse Printed Name:

Example