

Notice of Death



Securian Life Insurance Company • Minnesota Life Insurance Company

Madison Branch Office • 2920 Marketplace Drive, Suite 201, Fitchburg, WI 53719-5306
 MadisonBranch@securian.com

Name (last, first, middle, maiden)

Address (street, city, state, zip)

Social Security number	Date of birth (mo/day/yr)	Date of death (mo/day/yr)
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Employer name

Date of hire (mo/day/yr)	Last day worked (mo/day/yr)	Last day on payroll (mo/day/yr)	Premiums collected by employer for coverage through (mo/yr)
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Termination of active employment occurred because of

Is there evidence that death may have been accidental?

Yes No If yes, please explain

Coverage in force

Basic Supplemental Additional: 1X 2X 3X

Highest year earnings		Current year earnings	
Year	Amount \$	Year	Amount \$

Possible Beneficiaries or Contact Named Below

NAME				Relationship	ADDRESS			
Last	First	Middle			Street	City	State	Zip Code

Signature of employer's authorized representative X	Date (mo/day/yr)
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For your protection, state laws require the following to appear on this form: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison. Any insurance company or agent of an insurance company who knowingly attempts to defraud a policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Division of Insurance.

Securian Financial is the marketing name for Securian Life Insurance Company and Minnesota Life Insurance Company. Insurance products are issued by Minnesota Life Insurance Company or Securian Life Insurance Company, a New York authorized insurer. Minnesota Life is not an authorized New York insurer and does not do insurance business in New York. Both companies are headquartered in Saint Paul, MN. Product availability and features may vary by state. Each insurer is solely responsible for the financial obligations under the policies or contracts it issues.