

**Prince Hall Grand Chapter
Order of Eastern Star
State of Washington and Jurisdiction**

Beneficiary Form

Date:

This form is a request for you to update your beneficiary's name for your Chapter's records. A copy of this form will be kept in your Chapter's files and a copy will be on file with the Grand Secretary.

(Please Print)

Chapter Name: No.

Member Name:

It is my request to name the person listed below as my beneficiary.

Beneficiary's Name:

Address:

Phone: Email

Relationship

Member's Signature _____

Use the back of this form if more space is needed.