

[Your Full Name]  
[Your Address]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]

[Date]

[Company/Institution Name]  
[Department Name, e.g., Benefits or HR Department]  
[Address]  
[City, State, Zip Code]

**Subject: Authorization to Update Spousal Beneficiary Information**

To Whom It May Concern,

I, [Your Full Name], am writing to formally request an update to the beneficiary designations on my account(s). This request pertains to the following account(s):

- Account Type: [e.g., 401(k), Life Insurance, Pension]
- Account Number: [Your Account Number]

I wish to designate my spouse as my primary beneficiary. Please update your records with the following information:

**Spouse's Full Name:** [Spouse's Legal Name]

**Social Security Number:** [Spouse's SSN]

**Date of Birth:** [Spouse's Date of Birth]

**Relationship:** Spouse

**Percentage Allocation:** 100%

I have attached a copy of our marriage certificate for your verification purposes. Please confirm in writing once this update has been processed.

If you require any additional forms or information to complete this request, please contact me at [Your Phone Number].

Sincerely,

[Signature]

[Your Printed Name]