

Vehicle Insurance Beneficiary Designation

Date: _____

To Whom It May Concern,

I, [Your Full Name], the owner of the vehicle with VIN [Vehicle Identification Number], hereby designate the following beneficiaries to receive the benefits from my vehicle insurance policy in the event of my passing.

Beneficiary Information:

- Name: [Beneficiary Name 1]
- Relationship: [Relationship to You]
- Trust Fund Name: [Trust Fund Name]
- Percentage of Benefit: [Percentage]%

- Name: [Beneficiary Name 2]
- Relationship: [Relationship to You]
- Trust Fund Name: [Trust Fund Name]
- Percentage of Benefit: [Percentage]%

This designation is made in accordance with my expressed wishes and is to be executed as per my current vehicle insurance policy held with [Insurance Company Name].

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Address]

[Your Contact Information]