RETIREE AND DEPENDENT INFORMATION SHEET

WR								
RETIREE INFO	RMATION							
Retiree Name					Retire	e ID Number or S	SN [Date of Birth
Home Address		City	Str	tate Z	Zip Code		Primar	y phone number
QUALIFIED STA	ATUS CHANG	ES MUST E	BE SUBMITTED WI	TH DOCUMEN	TATION <u>WI</u>	THIN 30 DAYS OI	F THE QU <i>!</i>	ALIFYING EVENT.
Date of Change	ə:							
Type of Change (circle one): Marriage Birth or Adoption Dependent Chi				hild no longer eligi	ible for ben	efits		
		Divorce	Gained Other	Coverage D	eath of Depe	endent		
DEPENDENT IN	NFORMATION	l:						
Last Name	First Name	МІ	Social Security # (Required)	Date of Birth (MM/DD/YY)	Gender	Relationship ¹	Add Depender	Remove nt Dependent
1.							-	
2.								
3.		+				_		
Ad	ddress if different i	from Retiree						
			Daughter, SS=Ste aw Spouse, and D			FS=Foster Son,		
Leertify that the a	above information	is correct and	that I have read and un	nderstand the inform	nation on the b	ack of this form.		
Too. any and and a	DOVO IIIIOIIII.	10 0011001 0	mat maro roda a a		addir on the se	201 01 1110 101111		
Retiree Signature						Date		

For questions or assistance, please call Retiree Administration at (800) 333-3377 extension 2283.

FOR BENEFITS ADMINISTRATION USE ONLY

If adding a dependent(s) due to a QSC, completion of this form does not guarantee coverage in the Retiree Plans offered by Valero. If the addition of the new dependent(s) entitles the retiree to a new premium, a letter will be mailed to the retiree. All benefit elections must be made within 30 days from the QSC. The Retiree Benefits Department requires current address information to determine plan eligibility and for continuation of coverage, if applicable, under Federal COBRA regulations.

Qualified Status Changes and required documentation.

Marriage					
Spouse	A certificate of marriage is required. To change a name, a copy of the new Social Security card or a receipt from the Social Security office showing that a new card has been requested is required.				
Common Law Same Sex Domestic Partners	 Notarized Affidavit of Common Law Marriage or Affidavit of Domestic Partner Relationship required. Documentation varies by state. The Policy for Common Law Marriage or the Policy for Domestic Partner may be found in the Retiree SPD. Opposite sex domestic partners must be common law spouses to be considered eligible for coverage. 				
	May only be added upon hire or at annual open enrollment, if state does not recognize the unity.				
Birth, Adoption, Foster Care or Legal Guardianship					
Age Guidelines	Dependent children are eligible through end of month in which they turn 26 as long as they are not otherwise eligible for coverage through their employer.				
Children who are the retiree's natural children or are legally adopted by the employee.	Birth Certificate or proof of adoption required.				
Step children, foster or other children residing with the retiree in a legal guardianship and relying on the employee for support.	Proof of foster care or legal guardianship required (except for stepchildren).				
Stepchildren, foster or other children where support and coverage are required by a court order.	Court decree required.				
Children up to any age who are permanently, physically or mentally disabled before age 26, and have been continuously eligible for coverage under the Valero Plans, or for whom coverage is initially requested upon retirement or at annual open enrollment.	 Must be unable to support themselves, reside with the retiree and depend on the retiree for more than half of his/her support. Proof of permanent disability required. 				
Loss of Dependent Status					
Divorce	A copy of the final divorce decree or Affidavit of Dissolution of Common Law Marriage required. Please provide a mailing address above so we may notify deleted dependents of their eligibility for COBRA coverage. Rights to continuation of coverage are forfeited if notification of divorce or loss of dependent eligibility is made after 60 days from the date of the event. Refer to your Retiree Benefits Handbook for additional information on Qualified Status Changes.				
Significant Change in a Dependent's Benefits	Documentation from the dependent's benefits administrator supporting the significant change in benefits is required.				
Death of Dependent	A copy of the dependent's death certificate.				

Mail this form and documentation to Valero Energy Corporation Attn: Retiree Administration MS: E1N, PO Box 696000, San Antonio, TX. 78269. This form and documentation may also be faxed to (210) 370-5020. For questions or assistance, please contact (800) 333-3377 extension 2283.