

MEMBER DATA AND DESIGNATION OF BENEFICIARY

In accordance with the provisions of the County Pension Law, Act No. 96 of 1971 as amended, I hereby nominate *:

BENEFICIARY INFORMATION:

Name	Social Security #	Sex	% of Benefit
Street	City	State	Zip
Relationship			
Name	Social Security #	Sex	% of Benefit
Street	City	State	Zip
Relationship			
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Street	City	State	Zip
Relationship			

The person or persons to receive, if living, the amount standing to my credit in the Members' Annuity Reserve Account of the County Employees Retirement System in the event of my death before retirement, or to receive the Death Benefit if applicable.

MEMBER INFORMATION:

Name of Member	Date of Birth	Sex
Social Security #	Address	
Date	Signature of Member	
Witness		

*** If more than one beneficiary is designated it must be made clear how the amount payable to them is to be divided; or, primary beneficiary(ies) may be designated with contingent beneficiary(ies) indicated. The beneficiary designated must be one who has an insurable interest, or your Estate.**