

Spokane Employees' Retirement System Change in Retiree's Beneficiary

Retiree's Name (Please print): _____ Option: _____ *

Employee or SS #: _____ Phone #: _____

The Spokane Employees' Retirement System is hereby notified that for the purposes of Ordinance No. C7540, I hereby revoke the previously nominated beneficiary and hereby nominate and designate the following as the beneficiary to whom I authorize and direct the Board of Administration to pay any/all remaining contributions of my retirement account that may be payable because of my death.

Name	Relationship	Address	Social Security # OR Date of Birth

The Change of Beneficiary nomination and designation shall be effective when received by the office of the Spokane Employees' Retirement System. Any and all previous beneficiary designations or changes are hereby revoked.

***Note:** The beneficiary cannot be changed on the 'D' or 'E' Option.

Member Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

To be completed by a Notary Public
<p>On this day personally appeared before me _____ & _____, to me known to be the individual described in, and who executed the within and foregoing Change of Retiree's Beneficiary document, and acknowledged that they had executed the said instrument as his/her free and voluntary act and deed.</p> <p>Given under my hand and official seal this _____ day of _____ 2020.</p> <p style="text-align: center;">_____ Notary Public in and for the State of _____ Residing at _____ My Commission expires _____</p>