



# Municipal Employees' Benefit Trust

## Redmond MEBT Plan

### BENEFICIARY DESIGNATION FORM

Return this form to:

City of Redmond  
Human Resources  
MS: 3NHR  
P.O. Box 97010  
Redmond, WA 98073

Use this form to designate a beneficiary for a new or existing MEBT Retirement Account.

**Complete Section E Consent of Spouse or State Registered Domestic Partner\* only if you are married or have a State Registered Domestic Partner\* and designating someone other than your spouse or State Registered Domestic Partner\* as your primary beneficiary.**

#### Section A: PARTICIPANT INFORMATION

Name (Last, First, Middle)	Social Security Number		Marital Status S <input type="checkbox"/> M <input type="checkbox"/>
Permanent Address	City	State	Zip
Daytime phone no. ( )	Date Hired	Date of Birth	

#### Section B: BENEFICIARY DESIGNATION

Pursuant to the provisions of the plan permitting the designation of a beneficiary or beneficiaries by a participant, I hereby designate the following person or persons (or trusts) as primary and secondary beneficiaries of my accrued benefit under the plan payable by reason of my death:

**Primary Beneficiary(ies)** Relationship Codes: **S** = Spouse, **C** = Child, **P** = Parent, **T** = Trust, **E** = Estate, **DP** = State Registered Domestic Partner, **O** = Other

Name	Relationship	Street Address	City, State, Zip	Social Security #

#### Secondary Beneficiary(ies)

Name	Relationship	Street Address	City, State, Zip	Social Security #

#### Section C: PARTICIPANT AUTHORIZATION

**I HEREBY REVOKE ALL PRIOR DESIGNATIONS (IF ANY) OF BENEFICIARIES AND RESERVE THE RIGHT TO REVOKE OR CHANGE ANY BENEFICIARY DESIGNATION.**

The trustee shall pay all sums payable under the plan by reason of my death: (1) to the primary beneficiary, if he or she survives me; (2) if no primary beneficiary shall survive me, then to the secondary beneficiary(ies); and (3) if no named beneficiary survives me, then the trustee shall pay all amounts in accordance with the provisions of the plan.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date of this designation

\* State registered domestic partner as defined in Chapter 156 Laws of 2007 of the State of Washington (SSB 5336) as the same now exists or as the same may be amended in the future.

#### Section D: MEBT AUTHORIZATION \_\_\_\_\_

