



SHARE PLAN BENEFICIARY DESIGNATION FORM

BENEFICIARY FORM

POLICE OFFICER

FIREFIGHTER

Your social security number is requested for purposes of determining eligibility for retirement benefits as a plan member, retiree or beneficiary; for processing of retirement benefits; for verification of retirement benefits; for income reporting; or for other notice or disclosures related to retirement benefits. Your social security number will be used solely for one or more of these purposes. The collection and use of your social security number is authorized by Section 119.071(5)(a)(2)(a)(II), Florida Statutes.

Your designation of beneficiary(ies) tells us who should receive the accumulated value of your account if you die before full distribution of your account. If your primary beneficiary is not living at the time of your death, the proceeds will be paid to your estate. If your designated SHARE beneficiary shall predecease you, the rights and interest of such SHARE beneficiary shall automatically terminate. This shall completely discharge the liability with respect to the benefit so paid. You reserve the right to change the SHARE designated beneficiary only as allowed by law. Upon receipt of a newly completed written request by the Board of Trustees, any prior selection of designation of beneficiary shall be revoked.

In order to qualify for the SHARE plan distribution, the beneficiary must receive a monthly benefit from the Plan or elect, in lieu of any other benefit from the Plan, a return of employee contributions as provided in Board Policy.

PRIMARY:

Beneficiary Name _____ DOB _____ SSN _____

Street Address _____

E-Mail Address: _____ Home Phone _____ Cell Phone _____

Relationship _____ Is this beneficiary Married Single Divorced or Widowed? (Select One)

Male: _____ Female: _____ Is this beneficiary a Full-time Student? Yes No

A change in family status (marriage, divorce, etc.) may not effectively change a Share Plan designation of beneficiary. However, pursuant to Florida State Statutes 732.703, divorce or annulment may void the election of a former spouse as a designated SHARE beneficiary. To ensure that your assets are paid as you want them to be, keep your Share beneficiary updated.



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Retiree's Signature _____ Retiree's Name (Please Print) _____

Street Address, City, State & Zip _____

E-Mail Address: _____ Home Phone _____ Cell Phone _____

_____ Male: _____ Female: _____
Date of Birth _____ Social Security Number _____

Employee Number _____ Date of Hire _____ Today's Date _____

**Accepted this _____ day of _____, _____ by the Palm Bay Police
& Firefighters' Pension Plan, Board of Trustees, as recorded in the minutes of _____ by
Chairperson _____.**

OFFICE USE ONLY

Updated/Entered By: _____ **Date:** _____