

Deferred Vested Member Pension Survivor & Beneficiary Form



Member's Name	Phone Number
Last 4 Digits of Social Security Number	Personal Email Address
Full Address	

This form will be used in the event of the death of a vested member that is no longer employed by the City of Dallas in a sworn position to identify potential Qualified Survivors and designated beneficiaries. It is important to keep this information updated as life situations change over time.

Spouse	Suffix (circle) Mr. Ms. None Other _____	Name: Marriage Date:	Phone: Email:
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Qualified Surviving Children or Parents: A child under the age of 19 or a disabled child of any age may be a Qualified Survivor. The child must be a biological child born within 9 months of the member leaving active service or legally adopted prior to the member leaving active service. Indicate any child that may need consideration as a disabled child. In the absence of other Qualified Survivors, financially dependent parents may qualify. This is very rare.

Name	Relationship	Date of Birth	Disabled Y or N	Phone & Email

In the event of the death of a deferred vested member that was not eligible to receive a retirement benefit at the time the member left active service a lump sum payment will be paid to the spouse (unless waived by the spouse). If there is no spouse, to any qualifying survivors or other beneficiary designees. Please provide your primary and secondary designees. Secondary designees will only be paid in the event no primary designees remain.

Primary Beneficiary Designees – Note, you must list your children if you want them to be a designee after they are 19 or older

Name	Suffix	Relationship	Date of Birth	Address	Email & Phone #	%

Secondary Beneficiary Designees

Name	Suffix	Relationship	Date of Birth	Address	Email & Phone #	%

Signature: _____ Date: _____

SWORN AND SUBSCRIBED before me on this the _____ day of _____, 20_____.

Notary Public

Return to: Dallas Police & Fire Pension System 4100 Harry Hines Blvd. Suite 100, Dallas TX 75219