Spousal Waiver of Death Benefits

FOR OFFICE USE ONLY

Toll-Free: (800) 821-2251
alaska.gov/drb

Division of Retirement and Benefits
P.O. Box 110203
Juneau, AK 99811-0203

Juneau: (907) 465-4460
TDD: (907) 465-2805
Fax: (907) 465-3086

SECTION I – MEMBER INFORMATION

Please indicate your retirement system:

- ☐ Public Employees' Retirement System (PERS)
- ☐ Teachers' Retirement System (TRS)
- ☐ Elected Public Officers' Retirement System (EPORS)
- ☐ Judicial Retirement System (JRS)

Name (First, Middle, Last)

Social Security Number

Mailing Address (Street or P.O. Box, City, State, ZIP+4)

Daytime Telephone Number

SECTION II – INSTRUCTIONS

If you are MARRIED, your spouse is automatically your 100% primary beneficiary unless he or she consents to another beneficiary.

Your spouse's written consent may be waived if:

- You were not married to your spouse during any part of your PERS or TRS employment;
- You have been married for less than two years and you have established that you and your spouse are not living together; or
- Your spouse cannot be located.

Your spouse may waive entitlement to benefits by completing and signing the Spousal Waiver below before a notary public or other authorized person.

SECTION III – SPOUSE'S CONSENT

I, _____, am the legal spouse of _____.
I understand that I am entitled to death benefits that will be paid if my spouse dies. I have reviewed the Occupational and Nonoccupational provisions described in the PERS and TRS handbooks. I understand that, depending on my spouse's death, I may be eligible to receive either a lump sum benefit or monthly benefits for the rest of my life and that major medical insurance will be available to me and my eligible dependents while I am receiving monthly benefits.

By signing this consent, I am waiving my right to any benefits that would be paid to me, and consent to payment to the named beneficiary.

Signature

Date

SIGNATURE WITNESSED BY NOTARY PUBLIC

Printed Name

Date

Signature

NOTARY SEAL
REQUIRED

State of

Commission Expires

Type of identification provided by spouse:

- ☐ Driver's License
- ☐ State-Issued ID
- ☐ Passport
- ☐ Military ID
- ☐ Citizenship/Immigration Services ID