OKLAHOMA TEACHERS' RETIREMENT SYSTEM
P.O BOX 53524 - OKLAHOMA CITY, OK 73152
BENEFICIARIES DESIGNATION D.3B

D.3B

☐ Active ☐ Retired from OTRS

Name _____ SSN# or Ret# _____

Address _____ City _____ State _____ Zip _____

All information (full name, date of birth, age, relationship and address of proposed beneficiary/beneficiaries) must be completed.

SECTION 1 - PRIMARY BENEFICIARY(IES): is the sole beneficiary if living at the member's death. If more than one beneficiary is named in this section, the interest of all beneficiaries shall be equal. Upon the death of any designated primary beneficiary, his/her interest shall pass to the surviving primary beneficiaries in equal share. If you have more than 2 primary beneficiaries, use a copy of this page.

1. I hereby designate _____ _____ _____ _____ _____
First Name Middle Name Last Name Date of Birth Age

_____ _____
Relationship Address

2. I hereby designate _____ _____ _____ _____ _____
First Name Middle Name Last Name Date of Birth Age

_____ _____
Relationship Address

as my primary beneficiary(ies) if living, or in the event of prior death of all primary beneficiaries, then payment is to be made to the contingent beneficiaries is Section 2.

SECTION 2 - CONTINGENT BENEFICIARY(IES): does not share in the amount due if any of the primary beneficiaries are living at the member's death. Payment will be made to the contingent beneficiaries if all primary beneficiaries are deceased. If more than one contingent beneficiary is named, payment will be made in equal shares. Upon the death of a contingent beneficiary, his/her interest shall pass to the surviving contingent beneficiaries in equal shares. If you have more than 2 contingent beneficiaries, use a copy of this page.

1. I hereby designate _____ _____ _____ _____ _____
First Name Middle Name Last Name Date of Birth Age

_____ _____
Relationship Address

2. I hereby designate _____ _____ _____ _____ _____
First Name Middle Name Last Name Date of Birth Age

_____ _____
Relationship Address

as my contingent beneficiary(ies) to receive the amount set forth in the Teachers' Retirement Law in the event of my death. (Contingent beneficiaries do not share in the amount due if any of the primary beneficiaries are living at my death.)

Minor Beneficiary: Under Oklahoma law, if a minor child (younger than 18 years of age) is designated as beneficiary, it will be necessary that a guardian be appointed by the court before payment is made.

Revoking Previous Designation of Beneficiary: By this election, I hereby revoke all other former designations made by me and expressly reserve the right to make other and further changes at any time I may elect. If there is no designated beneficiary living at the time of my death, any amount due me shall be paid as provided by the Teachers' Retirement Law.

_____ _____
Signature Date

(The signature must appear exactly as the name appears on the top of this form. Power of attorney or Guardian signature not valid unless accompanied by court order specifically authorizing the right to change beneficiaries.)