

PERS Chapter 238 Program: Pre-Retirement Designation of Beneficiary Packet

Important: Read instructions before you complete and submit the enclosed form.

General Instructions

- Fill in the personal information block in Section A completely. If you do not know your PERS number, leave it blank.
- Type or print clearly in dark ink. Illegible forms may be returned, which could delay your request.
- Do not change anything on the form; alterations will void the form.
- Fill out **either** Section B **or** Section C.
- Sign and date the statement at the bottom of the form, and mail or fax the form to PERS.

Things to Consider

- **It is important that you file a Designation of Beneficiary form with PERS for each program in which you are a member.** If you die before retirement and there is no designation of beneficiary on file, distribution will be made in accordance with statute. Forms for all programs can be found on the PERS website at www.oregon.gov/pers.

Section B

- **If you elect the standard designation of beneficiary,** your designation will create a chain of beneficiaries that automatically allows for future marriages, divorces, births, deaths, or adoptions within your family as established by Oregon law.

Section C

- **If you elect the specific designation of beneficiary,** you may designate as many beneficiaries as you like and the percentage of the account distributed to each. You can also choose an estate or trust. If you elect the specific designation of beneficiary, complete the specific designation of beneficiary box. Make sure you include the percentage of your account you want to go to each beneficiary.

- Always show **full given names.** For example, Mary R. Doe, not Mrs. Robert Doe.

To name co-beneficiaries:

Mary J. Doe Mother 1/30/1901 ___%
and
John R. Doe Father 11/10/1900 ___%
Total = 100%

To name contingent beneficiaries:

Mary J. Doe Mother 1/30/1901 if living, 100%
otherwise to
Betty A. Jones Sister 8/12/1935 ___%
and
John R. Doe Father 11/10/1900 ___%
Total = 100%

Note: Beneficiaries do not need to be a person. Charities, trusts, or estates can also be named.

- To designate your **estate as beneficiary,** write “estate.”
- To designate a trust, name a trustee **and** a successor trustee rather than the trust itself. For example, “To John Doe (name), trustee, or Jane Doe (name), successor trustee, of the (name of trust), dated (date), held by (name and address).”
- In the event of a divorce, your designation of beneficiary may be subject to court order(s) on file with PERS.
- **Beneficiary designations are not valid until accepted and approved by PERS.**

Important: If you have a complex beneficiary situation, you may want to consult an estate planning attorney.

Providing your Social Security number (SSN) is voluntary. It will be used for confirmation purposes. If you choose not to supply your SSN, it may take PERS staff longer to process your form.

In compliance with the Americans with Disabilities Act, PERS will provide help filling out this form upon request. You may request help by calling **503-598-7377, toll free 888-320-7377, or TTY 503-603-7766.**



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This form is strictly for the PERS Chapter 238 Program. Call PERS or visit our website if this is not the form you need.

Section A: Applicant Information (Type or print clearly in dark ink. Illegible forms may be returned to applicant. This could delay your request.)

First name	MI	Last name	Social Security number
Mailing address (street or PO box)			PERS number
City	State	Zip	Country
			Day phone number

Fill out *either* Section B or C below.

Section B: Standard Designation of Beneficiary

I elect the Standard Designation of Beneficiary

- (a) To my **spouse**; and if he or she does not survive me, then to
- (b) my **child** or **children** in equal shares, and the share of any child who does not survive me to his or her children living at my death in equal shares; but, if none of my children survive me, then to the children of my children living at my death in equal shares; and if neither my children nor any of their children survive me, then to
- (c) my **mother** and **father** in equal shares, or to the survivor; and if neither survives me, then to
- (d) my **brothers** and **sisters** in equal shares, and the share of any brother and sister who does not survive me to his or her children living at my death in equal shares; but, if none of my brothers and sisters survive me, then to the children of my brothers and sisters living at my death in equal shares
- (e) my estate.

The terms “child” and “children,” as used in this beneficiary designation, shall include both natural born and adopted children, whether born or adopted before or after the date on which I selected this beneficiary.

No payment shall be made to persons included in any of the above groups should there be living at the date of my death persons in any groups preceding it as listed.

Except as designated above, no dependents of any beneficiary who does not survive me will take any interest or benefit in property subject to this designation.

Section C: Specific Designation of Beneficiary (Use additional pages if necessary.)

I elect the Specific Designation of Beneficiary.

Full name of beneficiary	Relationship	Date of birth	Percentage

Section D: Applicant Statement (Required)

I hereby revoke any and all previous PERS Chapter 238 program beneficiary designations.

 Applicant signature (do not print) Date

Be sure to read instruction page carefully for important information.

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Office use only	
<input checked="" type="checkbox"/> PERS	<input type="checkbox"/> OPSRP <input type="checkbox"/> IAP
<input type="checkbox"/> Member	<input type="checkbox"/> Alternate payee
<input type="checkbox"/> Cross reference member SSN	