

City of Wilmington

Velda Jones-Potter
City Treasurer



Louis L. Redding City/County Building
800 French Street
Wilmington, Delaware 19801-3537
(302) 576-2480
treasurer@wilmingtonde.gov

DESIGNATION OF BENEFICIARY FORM

Non-Uniformed Employees Retirement Act of 1979 (Plan II)
Non-Uniformed Employees Retirement Act of 1990 (Plan III)

Pensioner's Name: _____

I hereby designate the following beneficiary with respect to death benefits under the Retirement Plan:

PRIMARY BENEFICIARY

IF MORE THAN ONE NAME IS LISTED, PAYMENT WILL BE DIVIDED EQUALLY.

Name: _____ Street Address: _____

Relationship to Employee: _____ City/State/Zip: _____

Date of Birth: _____ Social Security #: _____

Name: _____ Street Address: _____

Relationship to Employee: _____ City/State/Zip: _____

Date of Birth: _____ Social Security #: _____

2ND BENEFICIARY (if Primary Beneficiary is not living)

IF MORE THAN ONE NAME IS LISTED, PAYMENT WILL BE DIVIDED EQUALLY.

Name: _____ Street Address: _____

Relationship to Employee: _____ City/State/Zip: _____

Date of Birth: _____ Social Security #: _____

Name: _____ Street Address: _____

Relationship to Employee: _____ City/State/Zip: _____

Date of Birth: _____ Social Security #: _____

Date

Signature of Pensioner Participant

**Upon completion, please return form to: CITY TREASURER'S OFFICE, Pension Division, 5th Floor,
City/County Building, 800 French Street, Wilmington, DE 19801**