

Please note:

People, Culture, and Technology Services [Human Resources] | Payroll Office | Phone: 619-388-6582

Designation of Beneficiary Under Government Code §53245

As provided in Section 53245 of the California Government Code, in the event of my death, I hereby designate the following as the person to receive all warrants or checks that will be payable to me from the District.

Beneficiary #1	Relationship:	
Name		
Address:		
City/State:		
Phone:	Email:	
If the person indicated above predeceases me,	I hereby designate the following	person as a secondary beneficiary:
Beneficiary #2	Relationship:	
Name	Birthdate:	
Address:		
City/State:		
Phone:	Email:	
understand that it is my responsibility to keep thin addition to and separate from the beneficiary dealifornia Public Retirement System, or in any other this designation form cancels and replaces any deserted until a new form is received. On sufficient proof of identity, the appointing powels and receives a warrant or check is entitled.	esignation filed with the State To er will, codicils or like document signation previously signed for t er shall release the warrants or	eachers' Retirement System and/or the s. his purpose only and shall remain in checks to the above designee. The
Employee Name		Employee ID
Employee Signature		Date

In the event you get married after you have completed this form, per California Probate Code Section

13601, your spouse is beneficiary by default.

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