

## PENSION BENEFICIARY DESIGNATION FORM

*(Use only for a minimum guarantee pension)*

### GENERAL INFORMATION

A pension beneficiary designation can be made using this form, or in an instrument signed by the participant, or by a Will. A designation in a Will is effective only if it relates expressly to a plan, either generally (for example “all pension plan payments”) or specifically. The Board is only obligated to pay a designated beneficiary if it has received actual notice of that designation.

A beneficiary can be a person, a corporation, a charity, a trust, or your estate. One or more beneficiaries can be designated.

Pension benefits will not be paid directly to a minor. If naming a minor as a beneficiary, you may wish to consider establishing a trustee to hold the property of the minor. You should seek legal advice prior to doing so to ensure that the property is held on proper terms of trust for the beneficiary. We recommend that legal advice be obtained in conjunction with any designation intended to create a trust.

**This form can be used by a retired or retiring member in respect of a minimum guaranteed pension option only.**

Where a member has more than one pension account under *The Civil Service Superannuation Act*, this beneficiary designation will apply to all accounts being paid under a minimum guarantee pension form unless specifically indicated otherwise.

For minimum guaranteed pensions, the beneficiary designation can be changed at any time unless it is made irrevocable. If the pensioner dies before the end of the minimum guarantee period, the remaining pension would be payable to the designated beneficiary or beneficiaries. If a designated beneficiary has pre-deceased the member, the share of the deceased beneficiary will be paid in equal portions to the surviving beneficiary(ies). If no beneficiary has been designated or there is no surviving beneficiary, the remaining pension would be payable to the member’s surviving spouse or common-law partner, or if none, to the member’s estate.

If a beneficiary who is receiving the pension dies before the end of the guarantee period, the remaining pension would be payable to that beneficiary’s estate.

**CAUTION:** Your designation of a beneficiary for a minimum guarantee pension by means of a designation form will not be revoked or changed automatically by a future marriage or divorce. Should you wish to change your beneficiary in the event of a change in your relationship status, you will have to do so by means of a new designation.

**This form cannot be used to make or change a designation for group insurance purposes.**

# PENSION BENEFICIARY DESIGNATION FORM

(Use only for a minimum guarantee pension)

Member name: \_\_\_\_\_

Member PIN: \_\_\_\_\_

Member PEN: \_\_\_\_\_

I hereby revoke any previous beneficiary designations respecting pension payments under *The Civil Service Superannuation Act* following my death ("Pension Benefits") and designate the following beneficiary or beneficiaries.

If no percentage is stated below, or the percentages do not add up to 100%, I direct that the Pension Benefits be divided equally among the surviving beneficiaries on my death. If any person identified as a beneficiary predeceases me, I direct that the share of the deceased beneficiary will go in equal portions to the surviving beneficiary(ies) on my death. If none of the person(s) identified below survive me, I direct that the Pension Benefits be paid to my spouse or common-law partner, or if none, to my estate.

1. Beneficiary full legal name: \_\_\_\_\_ SIN: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ % to beneficiary \_\_\_\_\_

Address and phone #: \_\_\_\_\_

2. Beneficiary full legal name: \_\_\_\_\_ SIN: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ % to beneficiary \_\_\_\_\_

Address and phone #: \_\_\_\_\_

3. Beneficiary full legal name: \_\_\_\_\_ SIN: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ % to beneficiary \_\_\_\_\_

Address and phone #: \_\_\_\_\_

*This designation is not valid unless signed and dated:*

**Member signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*If additional space is required, please use a separate sheet. Be sure your information is clear and includes your signature and the date.*