

DESIGNATION OF BENEFICIARY

TO THE BOARD OF EDUCATION, BELLMORE-MERRICK CENTRAL HIGH SCHOOL DISTRICT

Social Security No. Retirement Membership No.

In accordance with Contract Termination Leave Provisions, I, _____ hereby designate.

NAME _____ RELATIONSHIP _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

ADDRESS _____

as my beneficiary, to whom I hereby direct the Board of Education, Bellmore-Merrick Central High School District, in the event of my death prior to retirement, to pay the total amount of monies owed me in one LUMP SUM payment.

I hereby direct that should I survive the before-mentioned beneficiary, the amount which otherwise would have been payable to the beneficiary deceased shall be payable to my estate or to such other beneficiary as I shall hereafter nominate by written designation filed with the Board of Education, Bellmore-Merrick Central High School District. I reserve the right to change the above-designated beneficiary at any future time without the consent of the beneficiary.

SIGNATURE AND ACKNOWLEDGEMENT

Signed) _____ (Signature of Applicant) STATE OF NEW YORK County of _____

_____ On this _____ day of _____, 20 _____

appeared before me _____ to me personally known and known to be the

(Name of Applicant) individual described in and who executed the foregoing instrument, and _____ he duly

acknowledged to me that _____ he executed the same.

(Notary Public)

My Commission Expires