



**PUBLIC EMPLOYEES' RETIREMENT SYSTEM (PERS)  
 MEMBERSHIP/DESIGNATION OF BENEFICIARY CARD**

MEMBER INFORMATION				
Last Name		First Name, MI		Social Security Number*
Date of Birth / /	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Employing Agency		MPERA Assigned Employer Number
Member's Mailing Address				
City		State	Zip Code	
Daytime Phone Number ( )		Email Address		
PRIMARY AND/OR CONTINGENT BENEFICIARY DESIGNATION				
<input type="checkbox"/> I wish to retain the PERS beneficiary designation currently on file with MPERA.				
<p><b>Completion of this section revokes all prior beneficiary designations.</b> You may designate one or more primary or contingent beneficiaries by using a separate line for each person. Contingent beneficiaries receive benefits only if all listed primary beneficiaries are deceased. If you list two or more primary (or two or more contingent beneficiaries) they will be treated on a share and share alike basis. If you prefer a different allocation, please specify. If you designate a trust (for the benefit of a natural person only), a charitable organization or your estate as a primary or contingent beneficiary, you will also need to complete the "Other designation" section.</p>				
<p><b>Primary Beneficiary</b> - <i>attach additional list if necessary.</i></p>				
Full Name	Relationship	Birth Date	SSN	Allocation
				%
				%
				%
<p><b>Contingent Beneficiary</b> (optional) - <i>attach additional list if necessary.</i></p>				
Full Name	Relationship	Birth Date	SSN	Allocation
				%
				%
				%
<p><b>Other designation</b></p>				
Name of Trust, Charity or Estate		Trustee/Contact Name		Address
REQUIRED SIGNATURES				
Member Signature			Date	
Witness Name printed (not a beneficiary)		Signature	Date	