



# IPERS Enrollment/Beneficiary Designation

Please print in dark ink or type. Return this form to IPERS, P.O. Box 9117, Des Moines, IA 50306-9117.

## Section 1: Member Information and Beneficiary Designation

Social security number: \_\_\_\_\_ Date of birth (mm/dd/yyyy): \_\_\_\_\_ Male  Female

First name: \_\_\_\_\_ MI: \_\_\_\_\_ Last name: \_\_\_\_\_

Street address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Use the space below to designate a beneficiary to receive benefits which may be payable upon your death. For suggested wording, see the reverse side of this form. **You must specify your beneficiary(ies) by name and include date of birth if a minor. Do not make erasures or alterations.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Section 2: Member's Signature

You and your spouse must sign and date this form in front of a disinterested witness.

Are you married? Yes  No   
(If yes, your spouse **must** sign in Section 3.)

Signature of member: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of witness (Beneficiary may not act as witness.): \_\_\_\_\_

## Section 3: Spouse's Signature

As the spouse of the above-named IPERS member, I hereby acknowledge this beneficiary designation.

Signature of member's spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of witness (Beneficiary may not act as witness.): \_\_\_\_\_

**All incomplete and unclear forms will be considered invalid and returned.** To be valid, this form must be filed with IPERS prior to the date of the member's death.

**Retired reemployed members:** Please note that this designation will also change your retirement beneficiary, unless you retired under Option 4 (Joint and Survivor Annuity), for which certain exceptions apply.

Members may change their beneficiary designation at any time prior to their retirement by completing and filing a new form. For death benefits payable to beneficiaries, refer to the Member Handbook, which is available on the IPERS Web site or from IPERS.