



Imperial Community College District
BENEFICIARY DESIGNATION FOR DECEASED
EMPLOYEE

Under Government Code Section 53245*

INSTRUCTIONS: Complete this form and return it to the Human Resources-Payroll Office where it will be filed in your District personnel folder. You may retain a copy for your personal file.

Employee Name _____

Employee ID #, Last 4 SS# _____

(Check appropriate box)

CERTIFICATED

CLASSIFIED

STUDENT

OTHER

This is to inform you that in the event of my death, I hereby designate:

Name of Designee

as the person entitled to receive and negotiate all warrants or checks that will be payable to me from the above employer.

This designee is my:

- Husband
- Wife
- Parent
- Child
- Other relative _____
- other non-related _____

And he or she may be identified as follows:

Date of birth _____

Place of birth _____

Social Security # _____

Address, this date _____

I understand that it is my responsibility to keep this designation current, and further, I understand that this designation is **in addition to and separate from** the beneficiary designation filed with the State Teachers' Retirement System and/or the California Public Retirement System, or in any other will, codicils or like documents.

Date this designation is signed

Signature

***Government Code, § 53245**

"Any person now or hereafter employed by county, city, municipal corporation, district or other public agency may file with his appointing power a designation of a person who, notwithstanding any other provision of law, shall, on the death of the employee, be entitled to receive all warrants or checks that would have been payable to the decedent had he/she survived. The employee may change the designation from time to time. A person so designated shall claim such warrant or checks from the appointing power. On sufficient proof of identify, the appointing power shall deliver the warrants or paychecks to the client. A person who receives a warrant or check pursuant to this section is entitled to negotiate it as if he/she were the payee."

DISTRIBUTION: Submit completed and signed form to Human Resources