

Post - Retirement Death Benefit Checklist

- _____ Death certificate of Participant
- _____ Copy of Social Security Number (card) of Beneficiary
- _____ Copy of marriage License (**Only applicable** for remaining 36 months of payment death lump sum)
- _____ Current Mailing address of Beneficiary
- _____ Signature on Direct Deposit form (if applicable)
- _____ Voided Check for Direct Deposit form (if applicable)
- _____ Federal and State tax forms (if applicable)

PLEASE NOTE: Completed documents must be in our office no later than the fifth (5th) of each month in order for payment to be made at the end of the month. Please submit documents to adminretire@gacities.com