

## City of Austin Employees' Retirement System Beneficiary Designation form – Minor Beneficiary Supplement

### SECTION E: CUSTODIAN FOR MINOR BENEFICIARIES

This section may be used to designate a custodian to receive any distribution payable to a beneficiary prior to that beneficiary(ies) reaching 21 years of age. If you choose to name a custodian, the following section may be completed for each Primary Beneficiary or Alternate Beneficiary listed in Section B or Section C (see page 1) who is under 21 years of age. **NOTE:** If you designate a beneficiary who is less than 18 years old when you die and you do not designate a custodian for such minor beneficiary, a guardian of the minor's estate will be required to be appointed by the court to receive payment of benefits on behalf of the minor. If you do not wish to name a custodian, you should consult an attorney to make arrangements to limit delays in the payment of funds and avoid unnecessary costs to your estate, in the event the beneficiary is still a minor when you die.

Member's Name:(Last, First, Middle Initial)

Social Security Number

Name of Minor Beneficiary(ies) listed in Sections B or C (see page 1):

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Custodian:** If the above-named beneficiary(ies) is under 21 years of age at the time any distribution is payable by COA ERS to such beneficiary, I direct that any and all such distributions be made payable to \_\_\_\_\_, whose address is (Street, City, State, Zip Code) \_\_\_\_\_ as custodian for the above-named beneficiaries under the "Texas Uniform Transfers to Minors Act".

**Substitute Custodian:** If the named custodian is unable, declines or is ineligible to serve as custodian, I appoint \_\_\_\_\_, whose address is (Street, City, State, Zip Code) \_\_\_\_\_ as substitute custodian for the above-named beneficiary(ies) under the "Texas Uniform Transfers to Minors Act".

### SECTION F: NOTARIZED SIGNATURES

I have read and understand the instructions for completing this form. I certify that this Beneficiary Designation cancels any previous Beneficiary Designation(s) I have made for the benefits indicated above.

Member Signature	Notary Public	Date
*Spouse Signature	Notary Public	Date

*\*If you are married and wish to designate someone other than your current spouse as Primary Beneficiary for any portion of the death benefits, your current spouse must also sign this document before a Notary Public.*

## City of Austin Employees' Retirement System Beneficiary Designation form – Minor Beneficiary Supplement

### SECTION E (CONTINUED): CUSTODIAN FOR MINOR BENEFICIARIES

This section may be used to designate a custodian to receive any distribution payable to a beneficiary prior to that beneficiary(ies) reaching 21 years of age. If you choose to name a custodian, the following section may be completed for each Primary Beneficiary or Alternate Beneficiary listed in Section B or Section C (see page 1) who is under 21 years of age. **NOTE:** If you designate a beneficiary who is less than 18 years old when you die and you do not designate a custodian for such minor beneficiary, a guardian of the minor's estate will be required to be appointed by the court to receive payment of benefits on behalf of the minor. If you do not wish to name a custodian, you should consult an attorney to make arrangements to limit delays in the payment of funds and avoid unnecessary costs to your estate, in the event the beneficiary is still a minor when you die.

**Member's Name:(Last, First, Middle Initial)**

**Social Security Number**

**Name of Minor Beneficiary(ies) listed in Sections B or C (see page 1):**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Custodian:** If the above-named beneficiary(ies) is under 21 years of age at the time any distribution is payable by COA ERS to such beneficiary, I direct that any and all such distributions be made payable to \_\_\_\_\_, whose address is (Street, City, State, Zip Code) \_\_\_\_\_ as custodian for the above-named beneficiaries under the "Texas Uniform Transfers to Minors Act".

**Substitute Custodian:** If the named custodian is unable, declines or is ineligible to serve as custodian, I appoint \_\_\_\_\_, whose address is (Street, City, State, Zip Code) \_\_\_\_\_ as substitute custodian for the above-named beneficiary(ies) under the "Texas Uniform Transfers to Minors Act".

### SECTION F: NOTARIZED SIGNATURES

**I have read and understand the instructions for completing this form. I certify that this Beneficiary Designation cancels any previous Beneficiary Designation(s) I have made for the benefits indicated above.**

<b>Member Signature</b>	<b>Notary Public</b>	<b>Date</b>
<b>*Spouse Signature</b>	<b>Notary Public</b>	<b>Date</b>

*\*If you are married and wish to designate someone other than your current spouse as Primary Beneficiary for any portion of the death benefits, your current spouse must also sign this document before a Notary Public.*