



STATIONARY ENGINEERS LOCAL 39 TRUST FUNDS

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BENEFICIARY AFFIDAVIT

(FORM MUST BE NOTARIZED)

State of _____, County of _____

_____ being first duly sworn, deposes and states that he/she is the widow, son, daughter,
(Name)

father, mother, brother, sister (strike out those that do not apply to you) or the _____, (if none of the foregoing apply, indicate your relationship to the deceased here), of _____ (enter name of deceased).

I declare that the deceased was, in his/her lifetime, a member of the **Stationary Engineers Local 39 Trust Funds**, and is the identical person named in the Death Certificate which is attached and made a part of this affidavit, and that the surviving relatives of the deceased on the date of his death are listed below.

Do not leave any lines blank. If no surviving relatives as listed, indicate "Deceased" or "None", and provide a copy of their death certificate if deceased. If divorced, provide a copy of the filed QDRO or the Final Judgement

NAME

ADDRESS

1. Spouse:

2. Ex-Spouse:

☐ Attached is a notarized list of additional Ex-Spouses. (If applicable, mark the box and attach a notarized list.)

3. Children:

☐ Attached is a notarized list of additional Children. (If applicable, mark the box and attach a notarized list.)

4. Parents:

5. Siblings:

☐ Attached is a notarized list of additional Siblings. (If applicable, mark the box and attach a notarized list.)

Affiant's Signature _____ Date Signed _____

On _____, before me, _____, Notary Public, personally appeared to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary's Signature

Place or attach Notary's Seal here