

## SAN BERNARDINO **BENEFICIARY DESIGNATION FOR LAST WARRANT** COUNTY

Must print in Black or Blue ink ONLY

Employee ID	Last Name, First Name	Department

Note: Please refer to page 2 for employee information.

Pursuant to Section 53245 of the State of California Government Code, I designate the following person who, notwithstanding any other provision of law, shall be entitled, upon my death, to receive all County warrants, excluding warrants for payment of death benefits and refund of employee retirement contributions, that would have been payable to me had I survived.

## **Designee Information**

Last Name, First Name or Trust/Estate or Corporate Name	Re	ationship to Employee	Date of Birth		
Mailing Address					
City	State	Zip Code	Phone		

Note: The social security number or taxpayer identification number of the designee will be required before money can be released to the designee.

This designation will remain in full force and effect during my employment with San Bernardino County unless revoked by me in writing.

This designation will terminate on the date of my separation from County employment.

Employee Signature	Date	
Payroll Specialist Name (Print & Sign)	Phone	Date

This document/form incorporates use of e-signature(s) in accordance with the San Bernardino County Policy #03-12 and Standard Practice 1.

Verified By

Date

## **EMPLOYEE INFORMATION**

## Beneficiary Designation for Last Warrant will be denied by Central Payroll if:

- Designee name **or** trust is not legible or has been altered, (i.e., white-out, line through, written over).
- Address of designee <u>or</u> trust is not legible.
- 1. This form is used to designate the person who is entitled to receive all pay warrants for time worked and payment of leave balances in the event of the employee's death. If not completed, there will be a delay of up to 40 days for release of the funds. For purposes of this form, "person" means an individual, corporation, estate or trust.
- 2. Employee may only designate one (1) person.
- 3. The following fields must be completed:
  - Indicate the designee's full name; for example, "Mary Jane Smith", not "Mrs. John Smith".
  - A corporation, estate or trust may be designated by the employee. Under Last Name, First Name or Trust/Estate or Corporation, for a Trust/Estate write: "To the Trust (or Estate) of...." Central Payroll will require proof of the executor of the trust (estate).
  - Indicate the relationship of the person being designated such as wife, husband, registered domestic partner, daughter, son, mother, father, friend, etc. A minor child may be designated; however, Central Payroll will require proof of guardianship from an adult who has legal custody of that minor child prior to funds being released.
    - Same-sex domestic partnerships between persons who are both at least 18 years of age or opposite sex domestic partnerships when one or both persons are age 62 or older, are eligible to register a domestic partnership with the Secretary of State.
  - Indicate the date of birth of the designee.
  - Indicate the complete mailing address of the designee.
  - Employee must sign and date form.
- 4. A valid designation will become effective the date it is received by EMACS-HR or Central Payroll.
- 5. Changes to Designation
  - If you wish to make any changes to your designation, such as, name change, new designee, new designee mailing address, etc., you must complete a new form and submit to your department payroll specialist or through EMACS Employee Self-Service.
- 6. Retain a copy of this form for your records and submit original to your department payroll specialist or through EMACS Employee Self-Service.
- 7. The County will make a reasonable effort to contact the designee by the mailing address listed on the Beneficiary Designation for Last Warrant form. It is recommended that the employee notify their designee of their status so that the employee may update records as appropriate.