



WESTERN WASHINGTON GLAZIERS PENSION TRUST

BENEFICIARY AFFIDAVIT

(FORM MUST BE NOTARIZED)

State of _____, County of _____

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

of _____ I declare that the deceased was, in his/her lifetime, a member of the **Western Glaziers Retirement Trust Fund**, 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.

Name

Address

Phone Number

Spouse _____

Ex-Spouse 1) _____

2) _____

Children 1) _____

2) _____

3) _____

4) _____

Parents _____

Siblings _____

Affiant's Signature

Date Signed

Subscribed and sworn before me, this _____ day of _____, 20 _____

Signature of Notary Public _____

PLACE NOTARIAL SEAL HERE