

3) List all unmarried children of the member/retiree over the age of 19 and under the age of 23, and a full-time student as of the date of death of the member/retiree:

Name: SSN: Date of Birth:
Name: SSN: Date of Birth:

4) List all unmarried children of the member/retiree deemed physically disabled as of the date of death of the member/retiree:

Name: SSN: Date of Birth:
Name: SSN: Date of Birth:

5) List all unmarried children of the member/retiree declared mentally incompetent by a Court proceeding as of the date of death of the member/retiree:

Name: SSN: Date of Birth:
Name: SSN: Date of Birth:

6) List all unmarried children of the member/retiree named under 2) thru 5) above who were "dependent" on the member/retiree as of his/her date of death:

Name: Address: Phone:
Name: Address: Phone:

"Dependent" means a child who is less than 50% self-supporting, and reliant upon the member/retiree at the time of his/her date of death.

Section 3.18 of the El Paso Firemen & Policemen's Pension Fund Plan Document defines a "Qualified Child" or "Children" as follows:

"Qualified Child" or "Qualified Children" means the surviving unmarried dependent child or children of a Member or Retiree (a) under the age of nineteen (19); or (b) if over the age of nineteen (19), and under the age of twenty-three (23), then a full-time student at an accredited secondary university, technical or trade school approved by the Board; or (c) regardless of age, deemed physically disabled and non-self supporting by the Board of Trustees or declared mentally incompetent by a court of competent jurisdiction for as long as such incompetence or disability exists. For purposes of this sub-section "dependent" means a child who is less than fifty percent (50%) self-supporting. Notwithstanding these criteria, in no case shall "non-self-supporting" be construed to include persons over the age of nineteen (19) and disabled by excessive use of drugs or alcohol as determined by the Board of Trustees."

SECTION IV: SURVIVOR AFFIDAVIT

I hereby certify and affirm under penalty of perjury under the Laws of the State of Texas that the information contained here within is true and accurate to the best of my knowledge and belief.

Signature: Date:

must be signed in the presence of a Notary Public

STATE OF _____ COUNTY OF _____

Before me, a Notary Public, on this day personally appeared _____ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that s/he executed the same for purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, 20____. (SEAL)

Signature of Notary

Commission Expires

SECTION V: SUPPORT DOCUMENTATION (for internal office use only)

Check those that apply:

- Copy of Photo Identification
- Copy of Social Security Card
- Copy of Marriage Certificate
- Original or Certified Death Certificate of the Member
- W4-P Form
- Electronic Funds Transfer Authorization Form
- Records Release Form
- Other Documentation

List: