

Automotive Machinists Pension Trust

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Administered by
Welfare & Pension Administration Service, Inc.

APPLICATION FOR DEATH BENEFIT

*Note an incomplete form may delay your death benefit process.
Print or type the following information*

Name of Deceased Member (*Last, First, MI*)

Social Security No.

Mailing Address (*Street, City, State, Zip*)

Date of Death (*mm/dd/yyyy*)

Date of Birth (*mm/dd/yyyy*)

Union Local No.

Never Married Married Widowed Separated Divorced*

Marital Status of Deceased Member

Date of Divorce (*mm/dd/yyyy*)

* If the marriage(s) was dissolved after December 31, 1984, it is required that you attach a copy of the Dissolution Decree and Property Settlement Agreement and/or Qualified Domestic Relations Order (QDRO).

Name of Deceased Member's Last Employer

Deceased Member's Last Date
of Employment (*mm/dd/yyyy*)

Enclosed here with is a copy of the Death Certificate, a copy of the Member's Birth Certificate, a copy of my Birth Certificate, and copies of any and all of my Marriage Certificates (Marriage Certificates only necessary if beneficiary's name has changed).

To be completed by Beneficiary:

Name of Beneficiary (*Last, First, MI*)

Relationship

Mailing Address of Beneficiary (*Street, City, State, Zip*)

Social Security No.

Date of Birth (*mm/dd/yyyy*)

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Phone No.

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Mobile No.

Email Address

APPLICATION FOR DEATH BENEFIT

(continued)

By signing below, I hereby certify that I am the lawful beneficiary of the deceased.

Beneficiary's Signature Date Signed

Print Beneficiary's Name

NOTARY SEAL	NOTARIZATION OF BENEFICARY SIGNATURE
	Subscribed and sworn to me before this _____ day of _____, 20 _____
	Notary Public Signature Notary Public in and for the State of _____ Residing at _____ My commission expires: _____

Do not write below this line, for administration office only.

Total Benefit = \$ _____

Computed by: _____ Date: _____

Checked by: _____ Date: _____

Administrator: _____ Date: _____

NOTE: Attach a copy of documentary proof of age so specified on the page 3.

DOCUMENTS ACCEPTABLE AS PROOF OF AGE
(See Note)

A. A photocopy of one of the following documents will be acceptable as proof of age:

1. Birth Certificate
2. Baptismal Certificate

B. If neither of the preceding are available, copies of any TWO of the following may be submitted as verification of your age:

1. U.S. Census Report (at least 20 years old)
2. Passport - *may not be photocopied*
3. Naturalization or Immigration Papers - *may not be photocopied*
4. Family Bible Entries
5. Life Insurance Policies (at least 10 years old)
6. Marriage License or Application
7. Early School Records
8. Military Records
9. Civil Service Records
10. Children's Birth Certificates
11. Written Certification from Social Security
12. Written Certification of Union Local

NOTE: All documentation submitted as proof of age must clearly show your age in order to be acceptable. Also, if the name shown on the document differs from the present name, a copy of the court order or other document recording the name change should be submitted for identification purposes.