



Designation of Person Entitled to Receive Checks  
or Warrants in the Event of Employee's Death

**Employee Responsibility**

- ✓ It is the employee's option and responsibility to determine whether he/she desires to submit this form and to keep all information up to date.
- ✓ Return completed form to Human Resources.

**Beneficiary Information**

Pursuant to Section 53245 of the Government Code of the State of California, I, \_\_\_\_\_  
an employee of the City of Petaluma (type/print full name)

hereby designate \_\_\_\_\_, residing at  
(Name one person only)

\_\_\_\_\_ as the  
(street address) (City, State and zip code)

person who, in the event of my death, shall be entitled to receive all warrants or checks that would have been payable to me had I survived.

In the event the above designee is also deceased or is otherwise physically or mentally incompetent, then as an alternate, I hereby, designate the following person \_\_\_\_\_  
(name one person only)

residing at, \_\_\_\_\_  
(street address) (City, State, and zip code)

as the person who, in the event of my death, shall be entitled to receive the aforesaid warrants or checks. I understand this designation supersedes any such designation I may have made in the past.

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed By

\_\_\_\_\_  
Date