

Active Number _____

BURLINGTON EMPLOYEES' RETIREMENT SYSTEM

CHANGE OF BENEFICIARY

Date: _____

To the Retirement Board:

I, _____, the undersigned, revoke any previous nomination which may be inconsistent herewith and I hereby designate

_____ who resides at

_____ and whose relationship

to me is _____ as my beneficiary under Section 11 of the law.

I hereby authorize the Retirement Board to make payment to the beneficiary whom I have nominated above and agree, on behalf of myself and my heirs, that payment so made shall be a complete discharge of the claim and shall constitute a release of the System from any further obligation on account of the benefit.

I reserve the right to change the beneficiary designated above at any time by written notice to you.

(Signature of Member)

State of _____

County of _____

On this _____ day of _____, 20____, personally appeared before me the said named _____ to me known and known to me to be the person described in and who executed the foregoing instrument and he (or she) acknowledged that he (or she) executed the same.

(Seal) _____
(Notary Public)