

Report of death of Option C beneficiary

INSTRUCTIONS

Please submit **your completed form** to the MTRS in one of three ways:

- 1) **FAX** to 617-679-6842 (be sure to also fax a photocopy of death certificate); or
- 2) **MAIL** to MTRS Benefit Adjustments & Finalizations, 500 Rutherford Ave., Suite 210, Charlestown, MA 02129 (be sure to mail a photocopy of death certificate); or
- 3) **EMAIL** to RetServUnit@trb.state.ma.us (see instructions below).

Within seven days after we receive your form, we will contact you to let you know what the next steps are in the processing of the "pop up" of your monthly benefit to the Option A benefit amount that you would have received on the date of your retirement, plus any cost-of-living adjustments.

NOTE: Do NOT use this form if you are . . .
 Reporting the death of any MTRS benefit recipient who did not receive benefits under Option C: Please refer to the "Report a Death" section of our website and complete the "Report of death of MTRS member or benefit recipient" form.

DECEASED INDIVIDUAL

Name (*First, MI, Last*)

Date of death

Relationship to benefit recipient.

Last 4 digits of SSN

YOUR INFO

Name (*First, MI, Last*)

Street address.

City State ZIP

Phone

Last 4 digits of SSN MTRS member number (if known)

INTAKE INFO

Optional: Please note any additional information that you think would be helpful to us:

MTRS INTAKE

By _____

On _____

If submitting form via FAX or MAIL, ATTACH photocopy of individual's death certificate

SUBMIT YOUR COMPLETED FORM VIA EMAIL

Email your form to: RetServUnit@trb.state.ma.us

When your email has been successfully sent, you will receive an automated reply confirming that we have received your submission. Also, please either fax or mail a photocopy of the death certificate to the MTRS.