



OKLAHOMA LAW ENFORCEMENT  
RETIREMENT SYSTEM

# Funeral Home - Death Benefit Beneficiary Application

I am the representative for the \_\_\_\_\_ Funeral Home who was listed as a beneficiary of \_\_\_\_\_, who died on \_\_\_\_\_, and I request distribution of the \$5,000.00 Death Benefit per Oklahoma Statute Title 47, Section 2-306.3.

## Funeral Home Information (Death Certificate is required to process application)

Deceased Member Name \_\_\_\_\_ Deceased SSN \_\_\_\_\_

Funeral Home Name \_\_\_\_\_ Fed Tax ID # \_\_\_\_\_

Funeral Home Representative \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

## Important Tax Information and Election

*A distribution from the Oklahoma Law Enforcement Retirement System has certain tax consequences which could be unfavorable in some situations. While the System has been approved by the Internal Revenue Service as a qualified plan, this approval in no way addresses the tax consequences of this System to any entity or person receiving a distribution*

**I declare that I want NO federal or state taxes withheld. (If box is not checked please complete IRS W-4R & OK W-4R.)**

## Signature and Notary

Wherefore, the applicant hereby absolves the Board, the System and the Employer from any responsibility or liability as to the tax and other consequences of my election(s) indicated above.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

The Applicant stated above has attested that he/she has read this application, knows the contents thereof, and that the statements contained therein are true and correct.

Subscribed and sworn before me on \_\_\_\_\_ State of \_\_\_\_\_

Notary Signature \_\_\_\_\_ County of \_\_\_\_\_

Notary Title (and Rank) \_\_\_\_\_

My Commission Expires on \_\_\_\_\_

Commission # \_\_\_\_\_ (seal)

## Submission Information

Completed form can be sent to OLERS via:  
Mail: 421 N.W. 13th, Suite 100, Oklahoma City, OK 73103  
Fax: (405) 522-5004  
Email: [forms@olers.ok.gov](mailto:forms@olers.ok.gov)