



Designation of Guardian When Designating a Minor as Beneficiary

By Designating a guardian under the Uniform Transfer to Minor's Act for a minor beneficiary on this form, you eliminate the need for formal guardianship proceedings upon your death.

This form may be used in conjunction with any of NYCERS' Designation of Beneficiary Forms (such as form 131,133,134)

Member Number	Last 4 Digits of SSN	Date of Birth	[MM/DD/YYYY]	
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		1	I	

Member Information:

First Name	M.I.	Last Name			
Address				Apt. Nu	mhor
Address				Apt. Nul	
City			State		Zip Code

Guardian Information:

I, the undersigned member of NYCERS, hereby designate

First Name	M.I.	Last Name			
Address				Apt. Nu	mber
City			State		Zip Code
					-

as Guardian, for the below named Minor, under the Uniform Transfer to Minor's Act on the Designation of Beneficiary form filed with NYCERS.

Minor's First Name	M.I.	Minor's Last Name

If additional space is needed, continue on the next page

Sign this form and have it notarized, Page 2

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Guardian Information:

I further designate

First Name	M.I.	Last Name			
Address				Apt. Nu	mber
City		S	State		Zip Code
					_

as Guardian, for the below named Minor, under the Uniform Transfer to Minor's Act on the Designation of Beneficiary form filed with NYCERS.

Minor's First Name	M.I.	Minor's Last Name	
		L	
Signature of Member			Date

This form must be acknowledged before a Notary Public or Commissioner of Deeds

State of County of	_On this	day of	2 0	_, personally appeared
before me the above named, me to be the individual described in and who executed the fore executed the same, and that the statements contained therein a	egoing instrui	ment, and he of	r she acknowledged If you have an off	
Signature of Notary Public or Commissioner of Deeds				
Official Title				
Expiration Date of Commission				

Sign this form and have it notarized, THIS PAGE

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INSTRUCTIONS FOR COMPLETING THIS FORM

- > If you need assistance completing this form please contact NYCERS at 347-643-3000
- > Complete the Designation of Guardian form in ink or type. Except for signature, please print all items.
- > At the top of the form, print your Membership #, last 4 digits of Social Security #, Date of Birth, name and complete address.
- > You may designate a different guardian for each minor named as your beneficiary. Be sure to indicate the full names of the minor and the corresponding guardian.
- > Be sure to sign the form, in the space provided for **Signature of Member**, in the presence of a Notary Public or Commissioner of Deeds.
- > Page 2 of this form must be acknowledged before a Notary Public or Commissioner of Deeds.
- > **Do Not** make erasures, use white-out or cross-out any typed or printed information on this form, inasmuch as it renders the form invalid.
- > You may not name a Trustee or your estate as guardian.
- > You must return all pages of this form even if you have intentionally left portions blank. You do not have to return the Instruction Page if you received or downloaded it as a stand alone page.

Sign this form and have it notarized, Page 2