

Introduction Notice of Election of Benefits (Option D)

Pursuant to Massachusetts General Laws, Chapter 32, Section 12(2)(d)

Form Last Revised: February, 2020

This form permits an eligible spouse to elect to receive a benefit pursuant to Massachusetts General Laws, Chapter 32, Section 12(2)(d) (Option D). An eligible spouse is one who:

- Is married to a member with at least two years of creditable service
- Has been married to the member for at least one year
- If living apart from the member, it was for a justifiable cause

If the spouse is eligible, he or she may elect this benefit, and any other person named as an Option D beneficiary by the member will no longer be eligible for a benefit.

If a member dies without an eligible spouse, but with a nominated Option D beneficiary, that beneficiary will receive the Option D benefit.

If an eligible spouse does not elect this benefit, and there is also no nominated Option D beneficiary, then the member's accumulated deductions will be disbursed in accordance with Massachusetts General Laws, Chapter 32, Section 11(2)(c) to the beneficiary or beneficiaries listed on the *Beneficiary Selection Form for Refund of Accumulated Deductions*.

Form Last Revised: July, 2019

Retire	ment Board: Please enter your r	etirement board informat	on here.		
	Name of Retirement Board:				
	Address:				
	City/Town:		Zip Code:		
	Telephone:		Fax:		
Atam	eeting of the		Retirement Board held	lon	
	voted to grant member survivor	benefits to	nethenient bourd net	, who elected benefits	
under Massachusetts General Laws, Chapter 32, Section 12(2)(d) and who was the spouse of					
		ho died on			
n supp	ort of the granting of such survi	vor benefits, the board fin	ds that the following con	ditions are met:	
1			44.0.0		
1.	The late member was a membe	er-in-service on	, the date of	his/her death.	
2.	The late member had	years and	months of creditable serv	ice on the date	
	of his/her death.				
2		ions monthlined for	waana and living to gath	ar an tha data of his /har	
3.	The late member and spouse we death or living apart for justifia		, , , , , , , , , , , , , , , , , , , ,	er on the date of his/her	
	death of hving updit for justing	Sie eause. In inving apart, j	sicuse enclose the bound.	intengo or tact.	
~					
Sigr	nature of Board Chair or Ad	ministrator:			

Print Name:		
Signature:	Date:	