



NEW JERSEY & NEW YORK VOLUNTEER FIREMEN'S ASS'N INC.

Death Benefit Beneficiary Form

A death benefit fund has been established for the purpose of providing immediate financial assistance following the death of a personal or life member of this association to the named beneficiary. Should the designated beneficiaries pre-decease the eligible member, then no death benefit shall be paid.

All Life Members and Personal Members in good standing (Dues Paid) for a minimum of five (5) years shall be eligible provided said Personal Member is a member of the NJNYVFA at the time of their death. Only beneficiaries indicated on the application shall be eligible to receive the death benefit.

Benefit pay outs are distributed in a tiered system. Beneficiaries of Members for greater than 5 years up to 10 years receive \$250.00. Members for greater than 10 years up to 15 years will receive \$500.00. Members for greater than 15 years up to 20 years will receive \$750.00. Life Members will receive \$1000.00.

Each eligible person shall be responsible to file a DEATH BENEFIT BENEFICIARY FORM with the Financial Secretary of the Association. If no beneficiary form is on file, then no benefit shall be paid.

Personal Membership Information			
Name of Member			DOB <u> </u> / <u> </u> / <u> </u>
Address			City <u> </u>
State			Zip Code <u> </u>
E-Mail Address			
Phone numbers	Home <u> </u>	Mobile <u> </u>	
Fire Department Name			
Primary Beneficiary Information			
Name of Beneficiary			Relationship <u> </u>
Address			City <u> </u>
State			Zip Code <u> </u>
E-Mail Address			
Phone numbers	Home <u> </u>	Mobile <u> </u>	
Contingent Beneficiary Information			
Name of Beneficiary			Relationship <u> </u>
Address			City <u> </u>
State			Zip Code <u> </u>
E-Mail Address			
Phone numbers	Home <u> </u>	Mobile <u> </u>	

Please print the completed form and return to the Financial Secretary:
 John Schwedhelm
 5 Carlson St.
 Little Ferry, NJ 07643

Or email to: <mailto:lffd11@aol.com?subject=NJNY Death Benefit Beneficiary Form>

PLEASE NOTIFY FINANCIAL SECRETARY OF CHANGE OF ADDRESS OR BENEFICIARY.