



CITY *of* EL PASO

EMPLOYEES RETIREMENT TRUST

PENSION ADMINISTRATION

Robert Ash, M.B.A., J.D.
Executive Director and Legal Advisor

Pete Delgado
Deputy Executive Director

Alma R. Duenas
Benefits/Budget Specialist

Esmeralda Aguirre
Benefits Technician

Pauline Castillo
Benefits Technician

David Garcia
Pension Payroll & A/P Specialist

Karina Chavez
Retiree Coordinator/Data Entry

APPLICATION FOR DEATH BENEFIT CHECKLIST

- Your Social Security Card and a Certified copy of your Birth Certificate.
- Banking Information to include a voided check or bank document showing bank routing number and bank account number.
- Birth Certificates and Social Security Cards for:
 - Deceased spouse.
 - Dependent unmarried children under 19 years of age.
 - Dependent unmarried disabled adult children (you must provide medical records supporting the disability).
- Marriage Certificate.
- Death Certificate.
- Divorce Decree including a Qualified Domestic Relations Order (QDRO), if applicable.



400 W. San Antonio Suite B • El Paso, Texas 79901 • (915) 212-0112 • Fax (915) 212-0113 •
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BENEFICIO DE SOBREVIVIENTE

- Su tarjeta de Seguro Social y una copia certificada de su Acta de nacimiento.
- Información bancaria para incluir un cheque cancelado o un documento bancario que muestre el número bancario (routing #) y el número de cuenta.
- Certificados de nacimiento y tarjetas de Seguridad Social para:
 - Cónyuge fallecido.
 - Hijos solteros dependientes menores de 19 años.
 - Hijos adultos discapacitados solteros dependientes (debe proporcionar registros médicos que respalden la discapacidad).
- Certificado de matrimonio.
- Certificado de defunción.
- Decreto de divorcio que incluye una Orden calificada de relaciones familiares (QDRO), si corresponde.



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