

# CLAIM FUNDS OF DECEASED MEMBER



CLAIMANT'S NAME:	CLAIMANT'S ADDRESS:
DECEDENT'S NAME:	DECEDENT'S SOCIAL SECURITY NUMBER:

### BASIS OF CLAIM:

- The Community Property Agreement is attached and I am the named survivor in the document. Funds will be payable to my name.
- The Letters Testamentary (or Letters of Administration or other court document) is attached and I am named to act on behalf of the Estate. Funds will be payable to the Estate's name.
- There is no Community Property Agreement or Estate controlling the funds. I am the surviving heir and the funds will be payable to my name.

### MANNER OF DISBURSEMENT:

- Please transfer funds to the claimant's BECU account number: \_\_\_\_\_
- Please mail a check payable to the claimant's name to the address above.
- Please wire transfer funds to the following financial institution to an account in the Estate's name.\*  
Name of financial institution: \_\_\_\_\_  
Address of financial institution: \_\_\_\_\_  
Routing number: \_\_\_\_\_  
Account number: \_\_\_\_\_

**\*\$25 outgoing wire fee. Domestic wires only. A photo copy of the wire recipient's ID is required.**

### SIGNATURES

CLAIMANT OR EXECUTOR'S NAME:	CLAIMANT OR EXECUTOR'S SIGNATURE:	DATE
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**If there are multiple executors, all must sign the form or provide proof of their ability to act independently.**