

Employer Pre-Retirement Death Checklist

 OPSEU Pension Trust 1 Adelaide Street East, Suite 1200, Toronto, Ontario M5C 3A7
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1] PERSONAL INFORMATION

Deceased Member's Last Name	First Name and Initials	OPTrust ID Number or Employee ID

2] DOCUMENTS REQUIRED

Please attach any documents on file. If documents are missing, OPTrust will request them from the beneficiary.

	Attached	OPTrust to Request
<i>Notification of Death of Plan Member (OPTrust 1063)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Death Certificate or Funeral Director's Proof of Death	<input type="checkbox"/>	<input type="checkbox"/>
<i>If eligible spouse:</i>		
• Spouse's proof of birth	<input type="checkbox"/>	<input type="checkbox"/>
• <i>Declaration of Spousal Relationship (OPTrust 1059)</i>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of marriage, if applicable	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of common-law relationship, if applicable – 3 supporting documents required (<i>Spousal Relationship Information Sheet</i>)	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of Social Insurance Number	<input type="checkbox"/>	<input type="checkbox"/>
<i>If no eligible spouse:</i>		
• Contact address information for beneficiary or estate executor	<input type="checkbox"/>	<input type="checkbox"/>

3] EMPLOYER INFORMATION

Employer Official's Name	Business Telephone Number

Employer Official's Signature	Date Signed (DD/MM/YYYY)
x Sign Here	D D M M Y Y Y Y