



Death Notification

FOR OFFICE USE ONLY

Toll-Free: (800) 821-2251
alaska.gov/drb

Division of Retirement and Benefits
P.O. Box 110203
Juneau, AK 99811-0203

Juneau: (907) 465-4460
TDD: (907) 465-2805
Fax: (907) 465-3086

DECEASED INFORMATION

FIRST NAME	MI	LAST NAME	<input type="checkbox"/> MEMBER <input type="checkbox"/> SURVIVOR
			<input type="checkbox"/> SPOUSE
DATE OF DEATH / /	DATE OF BIRTH / /	LAST 4 DIGITS OF SSN OR RIN	
STATUS <input type="checkbox"/> ACTIVE <input type="checkbox"/> DEFERRED <input type="checkbox"/> RETIRED <input type="checkbox"/> NON-MEMBER	FUND <input type="checkbox"/> PERS <input type="checkbox"/> TRS <input type="checkbox"/> JRS <input type="checkbox"/> NGNMRS <input type="checkbox"/> EPORS	TIER <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	

SURVIVING SPOUSE INFORMATION

FIRST NAME	MI	LAST NAME	LAST 4 DIGITS OF SSN OR RIN
STREET ADDRESS		DATE OF BIRTH / /	
CITY		STATE	ZIP
PRIMARY PHONE ()	SECONDARY PHONE ()	EMAIL	

INFORMANT INFORMATION

FIRST NAME	MI	LAST NAME	RELATIONSHIP TO DECEASED
STREET ADDRESS			
CITY		STATE	ZIP
PRIMARY PHONE ()	SECONDARY PHONE ()	EMAIL	
ADDITIONAL INFORMATION			

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CALL TAKEN BY	DATE	TIME
SURVIVOR UNIT TECHNICIAN	DATE	ORDERED FICHE
FOLDER <input type="checkbox"/> MANILA <input type="checkbox"/> PINK <input type="checkbox"/> YELLOW <input type="checkbox"/> BLUE		