## **Spouse's Consent to Survivor Election**

**Instructions:** If you are married and you do not elect a reduced annuity to provide a maximum survivor annuity for your current spouse, complete Part 1. Have your spouse complete Part 2. Part 2 must be completed in the presence of a Notary Public or other person authorized to administer oaths. The person administering oaths must complete Part 3.

## Part 1 - To Be Completed by the Retiring Employee

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|---|-------------------------------------|------------------------|
| Name (last, first, middle)                        | Date of birth ( <i>mm/dd/yyyy</i> ) | Social security number |
|   |                                     |                        |

I have elected: (Mark the box(es) which describe the election you have made with regard to your current spouse. For example, a married employee who only elects a survivor annuity for a former spouse, must also check boxes "a" and "d".)

| a. | No regular or insurable interest | st survivor annuity for my | current spouse. I understand that: |
|----|----------------------------------|----------------------------|------------------------------------|
|----|----------------------------------|----------------------------|------------------------------------|

- No survivor annuity will be paid to my spouse after my death,
- His/her Federal Employees Health Benefits coverage based on my Federal employment will terminate upon my death, and
- He/she will not be eligible to enroll in the Federal Long Term Care Insurance Program (FLTCIP) after my death.

| b. | An insurable interest survivor annuity for my current spouse, but no regular survivor annuity for my current spouse. (I have completed Section F, |
|----|---|
|    | item 4 on my Standard Form 2801 naming my current spouse.)  |

|  | c. | A partial survivor annuity for my current spouse equal to 55% of \$ | a year. |
|--|----|---|---------|
|--|----|---|---------|

d. A survivor annuity for my former spouse \_

(name of former spouse)

equal to \_\_\_\_\_% of my annuity.

## Part 2 - To Be Completed by the Current Spouse of the Retiring Employee

**General Information:** The law requires that a retiring, married employee must elect to provide a survivor annuity for a current spouse, *unless* the current spouse consents to some other election by signing this form.

A court order which requires a retiring employee to provide a survivor annuity for a former spouse is not an election and spousal consent is not required. In other words, such a court order does not require a current spouse to waive the right to a survivor annuity for the current spouse, even though the Office of Personnel Management must honor the terms of the court order before it can honor the election for the current spouse. The current spouse may, therefore, receive a smaller annuity than elected or none at all, unless the former spouse loses eligibility for the courtordered survivor annuity.

**Important:** If the current spouse consents to an election to provide no survivor annuity or a partial survivor annuity and is later divorced from the retired employee, the retired employee may not then elect (nor can OPM honor a court order) to provide a former spouse annuity which exceeds the amount elected at retirement for that spouse. This also applies if the parties remarry.

I freely consent to the survivor annuity election described in Part 1. I understand that if my spouse elected no regular or insurable interest survivor annuity in Part 1 above, after my spouse dies I will not receive a survivor annuity, my Federal Employees Health Benefits coverage will terminate when my spouse dies, and I will not be eligible to enroll in the Federal Long Term Care Insurance Program (FLTCIP) if I am not already enrolled before my spouse's death. I also understand that my consent is final (not revocable).

| Name (type or print) | Signature (do not print) | Date ( <i>mm/dd/yyyy</i> ) |
|----------------------|--------------------------|----------------------------|
|                      |                          |                            |
|                      |                          |                            |

## Part 3 - To Be Completed by a Notary Public or Other Person Authorized to Administer Oaths

I certify that the person named in Part 2 presented identification (or was known) to me, gave consent, signed or marked this form and acknowledged that the consent was freely given in my presence on this

| the  | day of |                          | ,, 8   |                  |
|--|--------|--------------------------|--|------------------|
|  |        | (Month)                  | (Year)   | (City and State) |
| (Seal of Notary Public or witnessing authority of person authorized to administer oaths)<br>(Seal) |        | zed to administer oaths) | Signature (do not print)                                     |                  |
|  |        |                          | Expiration date (mm/dd/yyyy) of commission, if Notary Public |                  |
|  |        |                          |  |                  |
| Privacy Act Statement  |        |                          |  |                  |

Public Law 98-615, which establishes the spousal consent requirement, authorizes solicitation of this information. The data furnished will be used to determine the type of annuity awarded. The information may be shared and is subject to verification, via paper, electronic media, or through the use of computer matching programs with national, state, local or other charitable or social security administrative agencies in order to determine benefits under their programs, to obtain information necessary for determination or continuation of benefits under this program, or to report income for tax purposes. It may also be shared and verified, as noted above with law enforcement agencies when they are investigating a violation or potential violation of civil or criminal law. Executive Order 9397 (November 22, 1943) authorizes use of the Social Security number. Failure to provide information may delay or prevent action on your application.