



# MUNICIPAL POLICE EMPLOYEES' RETIREMENT SYSTEM

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## SPOUSAL CONSENT

Member's First Name	Middle Name	Last Name	Today's Date	Social Security Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### SECTION 1: SPOUSE'S INFORMATION

Spouse's First Name	Middle Name	Last Name	Spouse's Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse's Phone Number	Alternate Phone Number (if available)	Spouse's Date of Birth	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Under La. R.S. 11:2224(G), a member who is married under a community property regime must choose a retirement option that provides a benefit for their spouse that is at least fifty percent (50%) of the benefit payable to the retiree. The member may choose a payout with no survivor annuity or name another individual as beneficiary only if the spouse agrees with the choice and signs the following in the presence of a Notary Public. A married member is deemed to be married under a community property regime unless the member submits to the system a valid and enforceable matrimonial agreement establishing a marital regime of separate property.

### SECTION 2: Spouse's Approval of Retirement Option Election

*To be completed when selecting the Maximum Plan, Option 1, or a beneficiary who is not the member's spouse*

Spouse's Initials      I understand and acknowledge that my spouse has selected a retirement option or beneficiary on the retirement application that waives my right to a qualified joint and survivor annuity form of benefit. I hereby consent to such election and permit my spouse to change his or her beneficiary without my further consent. I understand and acknowledge that by this consent, I give up my right to a benefit equal to fifty percent (50%) of my spouse's benefit, should I survive my spouse after his or her death.

Spouse's Signature	Date
<input type="text"/>	<input type="text"/>

SWORN TO AND SUBSCRIBED BEFORE ME, Notary Public, in and for the state of \_\_\_\_\_, parish/county of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public (Signature)	Notary ID # or Bar Roll #
<input type="text"/>	<input type="text"/>

Notary Public Name	Commission Expires
<input type="text"/>	<input type="text"/>