



COUNTY OF SONOMA

Designation of Person to Receive Payroll Warrants or Checks Upon Death of Employee

(Does not include any other benefits such as Deferred Compensation, Retirement, or other insurance.)

Employee name: _____ ID # _____
(please print)

Legal marital status: married unmarried

Upon my death, I do hereby designate the following individual(s) to receive warrants or checks that would have been payable to me as an employee of Sonoma County:

spouse *registered domestic partner other than spouse or *registered domestic partner

Domestic partner or spouse's signature is required below if employee is designating someone other than his/her legal spouse or *registered domestic partner.

Name of Designee _____ ID _____
Designee's _____
Address _____

*Driver's license number
or other ID*

Designee's phone number _____

If more than one designee, check this box and list additional designees on the back of this form and indicate how funds should be divided.

This designation revokes any prior designation and shall remain in effect until canceled by me in writing.

Signature _____ Date _____

The County is required by law to forward to a deceased employee's designee warrants due but not paid until after death. Such designation is not a gift of funds under probate law. Probate code and community property laws may govern distribution of funds.

If married and spouse or *registered domestic partner is not designated as the sole designee, the spouse or *registered domestic partner must sign consent below.

employee's spouse employee's domestic partner

Being the employee's spouse or *registered domestic partner, I hereby consent to the above designation.

Signature _____ Date _____
(Signature of **spouse or *registered domestic partner**)

* Registered domestic partner refers to domestic partners with a signed and notarized Declaration of Domestic Partnership form (DP-1) on file with the State of California.