



The Standard[®]

Standard Insurance Company
Life Benefits Department 866.756.8115 Tel 971.321.5836 Fax
PO Box 2800 Portland OR 97208

Washington Council of Police & Sheriffs Life Insurance Benefits Death Notification

Please use this form to notify The Standard when you believe the deceased may have Life Insurance coverage through the Washington Council of Police & Sheriffs. The Standard will research this notification and contact the Beneficiary if there is existing coverage. If you have any questions, please call 866.756.8115 or email us at lifebenefits@standard.com.

YOUR INFORMATION

Your Name (Last, First, Middle)	Phone No.	Date	
Your Address	City	State	Zip
Your relationship to the decedent (e.g., spouse, child, parent, personal representative or executor of estate, etc.)			

DECEASED INFORMATION

Name of Deceased			
Address of Deceased		City	State Zip
Date of Death	Deceased was: <input type="checkbox"/> Member <input type="checkbox"/> Dependent	Member's Employer/Educational Entity	
Group Name Washington Council of Police & Sheriffs		Group No. 753380	

ACKNOWLEDGEMENT

I hereby certify that the answers I have made to the foregoing questions are both complete and true to the best of my knowledge and belief.	
Signature _____	Date _____