Deceased Member Official Notification

Tennessee Consolidated Retirement System
502 Deaderick Street
Nashville, Tennessee 37243-0201
1-800-770-8277 ◆ http//tcrs/tn.gov

Please complete this form to notify the Tennessee Consolidated Retirement System (TCRS) of a retirement system member who has deceased. If you are the executor of the estate, you are not required to provide your Social Security number in Section 2.

SECTION 1. DECEASED MEMBER INFORMATION

Member ID	Last 4 SSN XXX-XX-	Date of Death
Full Name		

SECTION 2. CLAIMANT INFORMATION

SSN		Date of Birth
Full Name		
Mailing Address		
City	State	Zip Code
Email		Phone Number
Relationship to Deceased		

SECTION 3. REQUIRED DOCUMENTATION

- A photocopy of the deceased member's death certificate must accompany this form.
- If the applicant is the court-appointed executor, the appointment must accompany this form.
- If the current beneficiary on file is deceased, a copy of the beneficiary's death certificate must accompany this form.

Claimant's Signature	Date