Participation in the Survivor Benefit Plan

I, _____, retired from the United States Marine Corps on
(Retired Service Member's Name)
_____. Prior to my retirement date, I elected to participate in the
(Date of Retirement)
Survivor Benefit Plan with _____ at the threshold amount/reduced amount
(Type of Coverage)
of _____. I was automatically enrolled in SBP due to
(Dollar Amount)
_____. I wish to participate in the
(Reason for Enrollment)
Survivor Benefit Plan with the above listed coverage. (_____) initials

I understand that if I am married and I decline SBP coverage or elect anything other than "spouse" or "spouse and child" coverage at a rate other than full retired pay, I must have spouse concurrence. (_____) initials

Name: _____
Rank: _____
SSN: _____
Address: _____
_____
Phone number: _____

_____ _____
(Retired Service Member's Signature) (Date)

Sworn to (or affirmed) and subscribed before me this _____ day of _____ ,
by _____.

_____
(Signature of Notary Public)

_____
(Print, Type or Stamp Commissioned Name of Notary Public)

Personally known _____ OR produced identification _____.

Type of identification produced _____.

Spouse Concurrence for Coverage at a Rate Other Than Full Retired Pay of the Survivor Benefit Plan

On my oath, I hereby depose and say:

1. My name is _____. I am _____ years old. I currently reside at
(Spouse's Name) (Age)
_____.

2. I am the spouse of _____.
(Retired Service Member's Name)

3. I married _____ on _____.
(Retired Service Member's Name) (Date of Marriage)

4. _____ retired from the United States Marine Corps on
(Retired Service Member's Name)

_____. I was married to him at the time he retired and I (am _____)
(Original Retirement Date)
married to him now.

5. _____ is receiving military retired pay. I understand that his military
(Retired Service Member's Name)
retired may will stop when he dies. (_____) initials

6. I understand that the Uniformed Services Survivor Benefit Plan was created by Congress in 1972 to allow a retiree a means to provide an annuity to a survivor after the retiree's death.

7. I understand that a member of the military service who is married at the time of retirement must have the "concurrence" of his/her spouse in order to make a valid election to decline participation in the Survivor Benefit Plan or elect coverage at a rate other than full retired pay . (_____) initials

8. When _____ retired, he desired to decline participation in the Survivor
(Retired Service Member's Name)
Benefit Plan or elect coverage at a rate other than full retired pay. He memorialized his election to decline Survivor Benefit Plan participation on a DD Form 2656. (_____) initials

9. When _____ retired, I desired to concur in his decision to decline
(Retired Service Member's Name)
participation in the Survivor Benefit Plan or elect coverage at a rate other than full retired pay . (_____) initials

10. I understand that my initial effort to memorialize my desire to concur in his election is invalid. In understand that, as a result, the initial election and concurrence are invalid and _____ has been "automatically enrolled" in SBP and "premiums" or
(Retired Service Member's Name)
"costs" are being "automatically enrolled" in SBP and "premiums" or "costs" are being deducted from his retired pay. (_____) initials

11. In order to "remedy" the invalid election, I hereby state that I knowingly, voluntarily and willingly concur in my spouse's earlier election in the Survivor Benefit Plan. (_____) initials

12. Before making this decision, I was provided with information and counseling about the advantages and disadvantages of enrolling in the Survivor Benefit Plan. All of my questions about the Survivor Benefit Plan have been answered to my satisfaction. I understand that when _____ dies, his military retired pay will stop. Furthermore, I understand
(Retired Service Member's Name)
that, as a result of my decision above, when _____ dies, if I survive him, I
(Retired Service Member's Name)
will not be entitled to an annuity based on 55% of his full retired pay, I will only be entitled to an annuity based on 55% of the reduced base amount elected by my spouse. (_____) initials

_____ _____
Spouse's Signature Date

Sworn to (or affirmed) and subscribed before me this _____ day of _____ , by _____.

_____
Signature of Notary Public

_____
(Print, Type or Stamp Commissioned Name of Notary Public)

Personally known _____ OR produced identification _____.

Type of identification produced _____.