



ESTIMATE FOR RETIREMENT PENSION BENEFIT
Request Form (Tier 2)

Pension Fund Name: _____

Member's Legal Name (include middle initial): _____

Date of Birth: ____/____/____

SALARY

The Pensionable Salary for a Tier 2 member is the Final Average Salary, defined as the average of the highest consecutive 48 months of the member's final 60 months of service (or 96 months of the final 120 months of service, whichever is greater), taking into account the Tier 2 salary cap. This estimate will use the annual pensionable salary reported on the last 4 (or 8) Department of Insurance Annual Statements filed by your pension fund.

CREDITABLE SERVICE

Date of Hire (Entry Date): ____/____/____

Last Day Worked: ____/____/____

Effective Date of Pension: ____/____/____

(Usually a Pension begins the latter of: Member's 55th Birthday - Or - First day after the Last Day Worked)

SERVICE PURCHASES

Incomplete and/or undisclosed Service Purchases will not be reflected in the estimate, which may considerably change your retirement eligibility and pension benefits.

UNPAID BREAKS IN SERVICE

Total Number of Days: _____

List Exact Dates: _____

Please send the estimate calculation to the following address:

Email Address (Please Print Clearly): _____

OR

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

By signing below, I certify that the information above is accurate to the best of my knowledge. I understand this is an estimate only and not an application for benefits. My final benefit may differ from this estimate pending my formal application to the Pension Board of Trustees.

Member's Signature: _____ Date: _____

Please return this signed document to our Benefits Team:

- Email to benefits@lauterbachamen.com
Mail to: Lauterbach & Amen, LLP
668 N. River Road
Naperville, IL 60563

Contact the Benefits Administration Hotline at 866.952.6329 if you have any questions.



SERVICE RETIREMENT PENSION BENEFIT

Request Form (Tier 2)

Continued

Pension Fund Name: _____

Member's Legal Name (include middle initial): _____

To determine the Final Average Salary to use to calculate the requested retirement pension benefit, please provide the member's historical annualized pensionable salary and the effective date of each change, for the member's final 120 months of creditable service:

Annualized Pensionable Salary

Effective: ____/____/____

Table with 2 columns: Description (Base Salary, Longevity, Education, Holiday, Other), Amount

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