



Date 12/6/2021

This is not a valid document. For illustrative purposes only

Estimated Retirement Allowance

Retirement Date: 12/1/2021

Retirement Plan: CERSNHZ

Retirement Type: Service

Member Information		
Member Name: John Doe		
Address: 123 Any Street		
City: City	State: KY	Zip Code: 40010
Member ID: 123456	Member DOB: 12/15/1970	

Beneficiary Information
Beneficiary Name: Jane Doe
Beneficiary DOB: 04/15/1970

MARK [X] IN ONE PAYMENT OPTION	PAYMENT TO MEMBER WHILE LIVING	PAYMENT TO BENEFICIARY AFTER MEMBER'S DEATH
	<input type="checkbox"/> BASIC	\$453.00
<input type="checkbox"/> LIFE with 10 YEARS CERTAIN	\$449.20	\$449.20 or \$0.00
<input type="checkbox"/> LIFE with 15 YEARS CERTAIN	\$441.75	\$441.75 or \$0.00
<input type="checkbox"/> LIFE with 20 YEARS CERTAIN	\$434.88	\$434.88 or \$0.00
<input type="checkbox"/> SURVIVORSHIP 100%	\$415.05	\$415.05
<input type="checkbox"/> SURVIVORSHIP 66 2/3%	\$427.85	\$284.95
<input type="checkbox"/> SURVIVORSHIP 50%	\$423.99	\$216.06
<input type="checkbox"/> POP-UP OPTION	\$406.44	\$406.44
<input type="checkbox"/> TEN YEARS CERTAIN		

SOCIAL SECURITY ADJUSTMENT OPTIONS	UNTIL AGE 62	AGE 62 AND AFTER
<input type="checkbox"/> WITHOUT SURVIVOR RIGHTS		
<input type="checkbox"/> WITH SURVIVOR RIGHTS		

- I reject all monthly payment options and request an actuarial refund of approximately _____
 I am also forfeiting any health insurance and death benefits provided by KPPA.
- I reject all monthly payment options and request a lump sum payment of approximately _____
 I am also forfeiting any health insurance and death benefits provided by KPPA.

I CERTIFY THAT I HAVE SELECTED THE OPTION OF MY CHOICE. I UNDERSTAND THAT AFTER THE FIRST DAY OF THE MONTH IN WHICH I RECEIVE MY FIRST RETIREMENT CHECK, I WILL NOT HAVE THE RIGHT TO CHANGE MY PAYMENT OPTION OR BENEFICIARY EXCEPT UNDER LIMITED CIRCUMSTANCES AS OUTLINED IN KRS 61.542.

Signature of Recipient: _____ Date _____

Signature of Spouse(if married): _____ Date _____

Signature of Witness(Required): _____ Date _____