

# Age Commuted Service Retirement Election



In order to begin receiving reduced pension payments between ages forty-eight (48) and fifty-two (52) with less than twenty-five years of service, it is necessary for you to complete the following election. This election is a formal statement of your decision to accept a **PERMANENT LIFE LONG REDUCTION** in your monthly pension in exchange for the payment of that pension commencing sometime between your attained ages of forty-eight (48) through fifty-two (52). **DO NOT** complete this form if you have decided to defer receiving your pension until you have attained age fifty-two (52) so that there is no reduction in your pension benefit.

## Section 1 – Member Information

_____		_____		_____	
Last Name		First Name		Middle Initial	
_____				_____	
Street Address				Rank	
_____		_____		_____	
City		State		Zip Code	
XXX-XX-_____		_____		_____	
Last 4 digits of SSN		DOB		Home Phone #	
_____				_____	
Email Address				Cell Phone #	

## Section 2 – Election To the Board of Trustees

Pursuant to Division (B) of Section 5505.16 of the Ohio Revised Code, please be advised that I elect to accept a **REDUCED** service retirement pension based on my attained age of \_\_\_\_\_ years at the time of receiving benefits. I understand that my pension will commence upon the day following the latest date of:

- (1) my last birthday
- (2) the last day for which I earned compensation

**I acknowledge that the reduced pension amount is not subject to change under any circumstances.**

## Section 3 – To be Completed in the Presence of a Notary Public

▶ \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Notary Public Acknowledgement

State of Ohio, County of \_\_\_\_\_

On this day appeared before me \_\_\_\_\_, who having been duly sworn deposes and says he/she is the person herein described; that his/her will and intent is to apply for retirement under Chapter 5505 of the Ohio Revised Code; and that the statements made herein are true and correct to the best of his/her knowledge and belief.

Sworn to and subscribed before me in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

(Seal)

▶ \_\_\_\_\_

Notary's Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Commission Expiration Date