



Initial Transfer Application

Request for Calculation for Potential Transfer of Creditable Service Per P.A. 100-0544 (HB0688)
From Article 3 to Article 4 (of the Same Municipality) - Effective 11/08/17

By signing below, I am requesting that my prior Article 3 Police Pension Fund provide and/or confirm the information listed below, per 40 ILCS 5/3-110.12, to determine the cost involved for a potential transfer of my creditable service. I understand that this is an initial application only, for the purpose of determining the costs that will be involved should I decide to pursue the transfer. I understand that I am giving consent to the performance of the calculation only and that I am not advising any party of commitment on my part to remit any funds or of my election to or declination to pursue this transfer of creditable service. **I understand that this application must be received by my Prior Article 3 Pension Fund no later than May 8, 2018 for my eligibility for this transfer to be valid.**

Member's Legal Name (include middle initial):
Street Address:
City: State: Zip:
Contact Phone # Email:
Date of Birth: / / Last 4 Digits of Social Security Number xxx-xx-

PRIOR ARTICLE 3 POLICE PENSION FUND

Name of Pension Fund:
Date of Hire: / / Last Day Worked: / /
Unpaid Breaks in Service, if applicable:
Total Contributions: After-tax Portion: Pre-tax Portion:
Contribution Refund: No Yes Date of Refund: / /
Specific time period to be transferred (maximum 6 years) From / / To / /

CURRENT ARTICLE 4 FIREFIGHTERS' PENSION FUND

Name of Pension Fund: Date of Hire: / /

By signing below, I certify that the information above is accurate to the best of my knowledge, and that I am an active member of the Article 4 Pension Fund identified above:
Member Signature: _____ Date / /