



Initial Transfer Application

Request for Calculation for Potential Transfer of Creditable Service Per P.A. 100-0544 (HB0688)

From Article 4 to Article 6 (Chicago) - Effective 11/08/17

By signing below, I am requesting that my prior Article 4 Firefighters' Pension Fund provide and/or confirm the information listed below, to determine the cost involved for a potential transfer of my creditable service per 40 ILCS 5/4-108.6. 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 4 Pension Fund no later than May 8, 2018 for my eligibility for this transfer to be valid. I further understand that it is my responsibility to contact the Firemen's Annuity and Benefit Fund of Chicago to identify any required action on my part to meet any Article 6 eligibility requirements.

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 4 FIREFIGHTERS' 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 10 years) From / / To / /

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 / /

To be completed by the Article 4 Pension Fund identified above: If applicable, while waiting for written direction from IDOI to clarify the "actuarially determined rate of interest" to use to calculate the contribution refund repayment pursuant to 40 ILCS 5/4-108.6(b), the Pension Board of Trustees directs Lauterbach & Amen to:

(check box) [ ] exclude from the calculation any waiting period between the date this application was received by our Fund (or its designated agent) and the date direction is provided by IDOI
(check box) [ ] use the interest rate of:
Trustee Name Trustee Title
Trustee Signature Date / /