

Summary of Retirement Application Information

If any of the information below is incorrect, please use the "Change Information" button at the bottom of the page to make corrections.

MEMBER INFORMATION

Name: JANE MEMBER

Member Number: 02-0123456

Date of Birth: 08/14/1956

Address: 123 MAIN

City: TRENTON **State:** NJ **ZIP:** 08685 **Country:** UNITED STATES OF AMERICA

Home/Cell Phone:

Work Phone Number: Ext.:

E-mail: JMEMBER@STATE.MAIL

Employer Name: DEPARTMENT OF THE TREASURY

RETIREMENT INFORMATION

Retirement Date: 04/01/2008

Retirement Type: SERVICE

Service credit purchase application WAS NOT submitted within the past 6 months

Last 36 months of salary WERE the highest salary years

PENSION OPTION INFORMATION

Pension Option Selected: Option 1

Beneficiary Information

Name: WILLIAM MEMBER

Social Security No.: 987 65 4321

Birthdate: 06/06/1950

LIFE INSURANCE BENEFICIARY INFORMATION

Name: WILLIAM MEMBER

Social Security No.: 987 65 4321

Birthdate: 06/06/1950

Relationship: HUSBAND

Selection Type: PRIMARY

Address: 123 MAIN

City: TRENTON

State: NJ

ZIP Code: 08685

Country: UNITED STATES OF AMERICA

Provided Compliments of
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