

100% Joint & Survivor Annuity Option Form for Pensioners



D A L L A S
POLICE & FIRE
PENSION SYSTEM



Pensioner's name _____

Pensioner's address: _____ Pensioner's Social Security number: _____

Police Department Fire Department

My rights to the various forms of benefits payable by the Dallas Police & Fire Pension System have been fully explained to me, and I have been advised to discuss this decision with my Spouse and our medical and financial advisors. I understand that if I elect the 100% Joint and Survivor Annuity Option:

- The benefits paid thereafter will be actuarially reduced based on my age and the age of my spouse.
- Upon my death, my spouse would receive the same benefit that was being paid to me before my death. (Spouse must be 55 years of age to receive the Benefit Supplement).
- If I die within one year after choosing this option, the election would be void.
- Once I file this form my decision cannot be changed after the effective date of the reduced benefit, _____.

After due consideration:

1. I elect the 100% Joint and Survivor Annuity Option;

OR

2. I do not elect the 100% Joint and Survivor Annuity Option.

Signature

SWORN AND SUBSCRIBED before me on this the _____ day of _____,
20____.

Notary Public