

100% Joint & Survivor Annuity Option Form for Pensioners



D A L L A S
POLICE & FIRE
PENSION SYSTEM



Pensioner's Name: _____ SSN: _____

Pensioner's Address:

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. And my spouse would (a) receive a benefit under the original option & (b) a refund of the monthly reduction (max. 12 months)
- Once I file this form my decision cannot be changed after the effective date of the reduced benefit, _____.

After due consideration:

I elect the 100% Joint and Survivor Annuity Option;

Spouse's Name: _____ Spouse's SSN: _____

Spouse's Date of Birth: _____

Date of Marriage: _____ Leave Active Service Date: _____

Pensioner's Signature

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

Dallas Police & Fire Pension System
4100 Harry Hines Blvd., Suite 100
Dallas, Texas 75219

Notary Public