



UNIVERSITY OF MAINE SYSTEM RETIREMENT PLAN FOR CLASSIFIED STAFF

Application for Benefits

TO: Retirement Committee
University of Maine System
16 Central Street
Bangor, Maine 04401-5106

FROM: Employee's Name \_\_\_\_\_

DATE: \_\_\_\_\_

I hereby apply for retirement benefits from the University of Maine System Retirement Plan for Classified Staff commencing \_\_\_\_\_ and elect to receive those benefits in accordance with the following option (check one):

- Life Annuity
% Joint and Survivor Option (enter 50%, 66 2/3%, 75%, or 100%)
Ten-Year Certain and Continuous Option

My mailing address for benefit checks will be: \_\_\_\_\_

My legal address, if different from above, will be: \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE OF WITNESS

SIGNATURE OF MEMBER

CERTIFICATION AND INSTRUCTIONS TO TRUSTEE

TO: Mellon Bank, Trustee

The above member is certified for retirement and you are authorized and directed to pay the following monthly retirement benefit, first payment to be made as of \_\_\_\_\_:

- Life Annuity -- \$\_\_\_\_\_ to member for life
% Joint and Survivor Option -- \$\_\_\_\_\_ to member for life, with \$\_\_\_\_\_ payable to the beneficiary indicated on the attached form for life after the member's death.
Ten-Year Certain and Continuous Option -- \$\_\_\_\_\_ to member for life, with the same amount payable to the member's beneficiary until \_\_\_\_\_ if the member dies before that date.
DISTRIBUTION CODE '2' - Use this code for retirees who have not reached age 59 1/2.
DISTRIBUTION CODE '7' - Use this code for retirees at least 59 1/2 or older.

FOR THE RETIREMENT COMMITTEE

Date

Calculation verified by

FOR TOWERS WATSON

Date