State of West Virginia Consolidated Public Retirement Board Internet Form (Signature in Blue Ink Only)

4101 MacCorkle Avenue SE, Charleston, West Virginia 25304-1636 Telephone: 304-558-3570 or 800-654-4406 Fax: 304-558-1394

Dear Member:

Please complete and return the following information to this office to obtain an estimate of your retirement benefits. Upon receipt of this information, the Consolidated Public Retirement Board will prepare an estimate of your retirement benefits.

Important Notice: An estimate is merely advisory in nature and is not binding upon either the Retirement Board or the Member.

BENEFIT ESTIMATE REQUEST WEST VIRGINIA TEACHERS' RETIREMENT SYSTEM (TRS)

| WEST VIRGINIA TEACHERS' RETIREMENT SYSTEM (TRS) | | | | |
|--|--|------------|------------------|----------------------|
| Nar | me | Date o | f Birth | |
| Ado | dress SS# _ | | | |
| City | y/State | Zip Co | ode | |
| Hor | me Phone# Work Phone# Current Emplo | oyer | | |
| I anticipate my last day of work will be | | | | |
| Nar | me of Beneficiary | SS# _ | | |
| Rel | lationship | Date o | f Birth | |
| Hav | ve you purchased or reinstated service within the last year? | □No | | |
| Do | you have military service? | enclose a | copy of your Dl | D-214 form. |
| Has | s your military service been counted in another State's Retirement System? | ☐ Yes | □ No | |
| Are | e you currently serving as an elected public official? | □No | | |
| Do | you currently have an outstanding loan with the Teachers' Retirement System? | [| Yes | □ No |
| If yes, you will have two options that you may choose at the time of retirement in the event you have an outstanding loan: | | | | |
| 1. 2. | Pay in full the balance of the loan plus accrued interest <u>before the effective da</u> Permanently have my monthly annuity option actuarially reduced by the an plus accrued interest. | | | ce owing on the loan |
| Are | e you covered under PEIA? | a copy of | your birth certi | ficate. |
| | I wish for my current salary in the amount of \$t | to be used | in calculating m | y benefit estimate. |
| If you are interested in converting sick/annual leave for service credit: Total Number of days | | | | |
| Please note this estimate request form may not be used to effect a change of beneficiaries. Please update your beneficiary information. | | | | |
| *** In preparing for retirement, please keep in mind that processing time for computing a retirement annuity may take up to eight weeks after your effective date of retirement, which is the first day of the following month that you are removed from the payroll.*** | | | | |
| Sign | nature: | Date: | | |
| CO | MMENTS | | | |