APPLICATION FOR VESTED RIGHTS PENSION

| Michael | Beauce, be | ing a person leaving emplo | yment with the |
|--|--|--|-----------------------|
| service having occurred | , and flaving completed in I during the period from the of resignation or change | om (date of entry into | Pension Plan) つるよう |
| hereby makes application Ordinances As such form | to receive the vested right ner employee. I understal | nts pension provided for by the nd the pension requested wance in effect on the date of | ill be computed |
| I hereby further certify tha | t my date of birth is | | |
| The date I will begin to red | ceive my pension will be _ | 3/1/2032 | |
| contributions that I paid in | nto the Pension Fund dur onvicted of a felony during | application seeking to obtain ring the period of my emplog my period of employment, | yment set forth |
| Signature | | Social Security | Number |
| Police | | | |
| Police Department/Division | | Street Add | ess |
| Police Serge Job Classificati | ant | | |
| Job Classificati | on | City, State, Zip | Code |
| | | | |
| STATE OF FLORIDA COUNTY OF PINELLAS | | | |
| COUNTY OF PINELLAS | The foregoing instrumen | t was acknowledged before | me |
| | by means of physical p | presence or □ online notariz Secolom be∠, 20∂S | |
| | who is personally known | | |
| ALYSSA GAGLIARDI Commission # HH 476578 Expires January 28, 2028 | | as identific | ation. |
| | 1 7 | Notary Pu | lic (Signature) |
| | Alyssa Gasl | (Name of | Notary Printed) |
| | Commission No | | |
| Rev. 10/2022 | | · V | ested Pension Form |

APPLICATION FOR VESTED RIGHTS PENSION

| ANDREW SUL | being a person leaving employment with the |
|---|---|
| service having occurred | i, and having completed five (5) or more years of credited service, such d during the period from (date of entry into Pension Plan) |
| 04/04/2015 to (d | ate of resignation or change of status) <u>09 / 05/25</u> |
| | to receive the vested rights pension provided for by the City Code of mer employee, I understand the pension requested will be computed |
| | of the City Code of Ordinance in effect on the date of resignation. |
| | |
| I hereby further certify that | t my date of birth is |
| The date I will begin to red | ceive my pension will be <u>04/04/2035</u> . May 1, 2035 |
| | tify that I have made no application seeking to obtain a return of the nto the Pension Fund during the period of my employment set forth |
| | onvicted of a felony during my period of employment, and I have not |
| /mc | |
| Signature | Social Security Number |
| oignature | Godal Gedung Number |
| TIRE | |
| Department/Divis | |
| FIRE INSPEC | TOR II |
| Job Classificat | |
| | |
| STATE OF FLORIDA | |
| COUNTY OF PINELLAS | |
| O O O O O O O O O O O O O O O O O O O | The foregoing instrument was acknowledged before me |
| | The foregoing instrument was acknowledged before me |
| | by means of physical presence or online notarization, |
| | this 3 day of Sopaler Nov., 2025 |
| | by Andrew Syllivan, |
| ALYSSA GAGLIARDI | who is personally known to me or has produced |
| Commission # HH 476578 Expires January 28, 2028 | as identification. |
| FLOR | |
| | Alussa Gogliard Notary Public (Signature) |
| | (Name of Maken Deightor) |
| | (Name of Notary Printed) |
| | Commission No |
| Rev. 10/2022 | |

Vested Pension Form