## APPLICATION FOR VESTED RIGHTS PENSION

such service having occurred during April 7,2003 to (date of resignation to receive the Ordinances. As such former employee,	being a person leaving employment with the completed ten (10) or more years of credited service, the period from (date of entry into Pension Plan) on or change of status)  Lebruary 24,20/7 vested rights pension provided for by the City Code of I understand the pension requested will be computed de of Ordinance in effect on the date of resignation.
I hereby further certify that my date of bi	rth is July 26, 1969.
The date I will begin to receive my pensi	on will be August 1, 2024.
contributions that I paid into the Pensio	
Signature	Social Security Number
Parks & Rec/Administration Department/Division	3920 Silk Oak Lone Street Address
Admin Support Manager Job Classification	Palm Harbor, FL 3468 City, State, Zip Code
STATE OF FLORIDA COUNTY OF PINELLAS	The foregoing instrument was acknowledged before me this //eтн day of February , 2017
	by FEUCIA DONNERLY
	who is personally known to me or who has provided
	as identification
	and who did/did not take an oath.
	Limbul Motary Public
	Kimboacy Hansylue Name of Notary Printed
	My commission expires  Commission # FF 977295  My Commission Expires  March 30, 2020

## **APPLICATION FOR VESTED RIGHTS PENSION**

City of Clearwater, Florida, and having such service having occurred during to (date of resignat hereby makes application to receive the Ordinances. As such former employee	, being a person leaving employment with the completed ten (10) or more years of credited service, the period from (date of entry into Pension Plan) ion or change of status)  e vested rights pension provided for by the City Code of I understand the pension requested will be computed ode of Ordinance in effect on the date of resignation.
The date I will begin to receive my pens	ion will be
Further, I additionally certify that I have made no application seeking to obtain a return of the contributions that I paid into the Pension Fund during the period of my employment set forth above, I have not been convicted of a felony during my period of employment, and I have not received any other type of pension from the City.	
Signature	Social Security Number
LIBRARY Department/Division	108 Monarch Ct Street Address
Job Classification	City, State, Zip Code
Connenuencost of Danisyesta	
STATE OF FLORIDA	The foregoing instrument was acknowledged before
COUNTY OF PINEEEAS	me this 18 day of kingary, 2017
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	by Sacrett Kerth
	who is personally known to me or who has provided
	a 10 reper 150 certe as identification
	and who did/did not take an oath.
	Specifical Notary Public  Lynne Price Tayfore Name of Notary Printed
	Lynne Price Taylore Name of Notary Printed
	My commission expires: $\frac{12-12\cdot 2020}{12\cdot 2020}$

NOTARIAL SEAL
LYNNE PRICE TAYLOR, Notary Public
Lower Moreland Twp., Montgomery County
My Commission Expires December 12, 2020

## **APPLICATION FOR VESTED RIGHTS PENSION**

such service having occurred during occurred during occurred during to (date of resignation to receive the Ordinances. As such former employee	being a person leaving employment with the completed ten (10) or more years of credited service, the period from (date of entry into Pension Plan) tion or change of status) March 17,2017 e vested rights pension provided for by the City Code of e, I understand the pension requested will be computed ode of Ordinance in effect on the date of resignation.
The date I will begin to receive my pens	sion will be October 1,2017
Further, I additionally certify that I have contributions that I paid into the Pensi	e made no application seeking to obtain a return of the on Fund during the period of my employment set forth felony during my period of employment, and I have not
lasthy.	Social Socurity Number
Planning Development Dev S Department/Division	Social Security Number  SUCS 1343 HOUNARD St.  Street Address
Development Review Tech Job Classification	Clearwater, FL 33756 City, State, Zip Code
STATE OF FLORIDA COUNTY OF PINELLAS	The foregoing instrument was acknowledged before me this 6th day of February, 2017 by Scotty Jordan who is personally known to me or who has provided as identification
	and who did/did not take an oath.  Onder M. Mouton Notary Public  Jennifer M. Mouton Name of Notary Printed
	My commission expires:  JENNIFER M MOULTON  MY COMMISSION #FF105569  EXPIRES March 27, 2018  (407) 398-0153 FloridaNotaryService.com