CITY OF CLEARWATER PENSION ENTITLEMENT OPTION REQUEST FORM FOR BENEFICIARIES

I, Shavon Fakey do hereby apply to receive benefits under the (Please print name)
City of Clearwater General Employees' Pension Plan as a surviving beneficiary of the following employee:
Employee Name Robert Fakey Employee ID# 5099
Date of Birth: 7 24 64 Date of Death 6 11 7 Line of Duty: Y/N
Job Classification: Engineering Manager
Department: Engineering Division:
Was the beneficiary named and on file prior to the employee's death? (Y)/ N

The City of Clearwater Employees' Pension Plan provides multiple options to Plan Participants as to the manner of the pension benefit payment. Option 1 below represents the standard or normal form of retirement benefit for Participants eligible to retire prior to January 1, 2013. Option 2 below represents the standard or normal form of retirement benefit for Participants eligible to retire after December 31, 2012. The other optional forms (#3- #7) shall be computed to be the Actuarial Equivalent of the respective normal benefit.

Option 1 - Joint and Survivor Annuity

An annuity paid monthly for the life of the Participant, with a 100% survivor annuity paid monthly for a period of five years following the death of the Participant to the beneficiary, provided that following such five year period the survivor annuity shall be reduced to 50% of the original survivor annuity amount. [See section 2.397 (a) (3) (A)] The Participant's surviving spouse receives the designated amount for the rest of his/her life or until he/she remarries. If no surviving spouse, dependent children under the age of 18 shall be deemed to be the beneficiary and receive the designated amount until the age of 18. [Section 2.397 (a) (3) and Section 2.398 (b) (1)]

*Only available for surviving spouse or minor children of either hazardous duty personnel or non-hazardous personnel eligible to retire before 1/1/2013.

Option 2 – Life Annuity

The Participant receives his/her pension as long as he/she lives. Upon the death of the Participant, benefits cease. [Section 2.416 (c) and Section 2.424 (b) (2) a. 1.]

Option 3 - 10 Year Certain & Life Annuity

The Participant receives his/her pension as long as he/she lives. If the Participant dies <u>before</u> 120 monthly payments have been made, the remaining payments up to the 120 payments are made to his/her beneficiary, or the estate if his/her beneficiary is not alive. [Section 2.424 (b) (2) a. 2.]

Option 4 - 50% Joint & Survivor Annuity

The Participant receives his/her pension as long as he/she lives. If the Participant dies first, the beneficiary receives 50 percent of the pension for the rest of the beneficiary's life. If the beneficiary dies first, the Participant may elect another beneficiary or may continue to receive 100% of his/her pension and upon his/her death, benefits cease. [Section 2.424 (b) (2) a. 3.]

Option 5 - 75% Joint & Survivor Annuity

The Participant receives his/her pension as long as he/she lives. If the Participant dies first, the beneficiary receives 75 percent of the pension for the rest of the beneficiary's life. If the beneficiary dies first, the Participant may elect another beneficiary or may continue to receive 100% of his/her pension and upon his/her death, benefits cease. [Section 2.424 (b) (2) a. 3.]

Option 6 - 100% Joint & Survivor Annuity

The Participant receives his/her pension as long as he/she lives. If the Participant dies first, the beneficiary receives 100 percent of the pension for the rest of the beneficiary's life. If the beneficiary dies first, the Participant may elect another beneficiary or may continue to receive 100% of his/her pension and upon his/her death, benefits cease. [Section 2.424 (b) (2) a. 3.]

Option 7 - 66 3/3 // Joint & Survivor Annuity

The Participant receives his/her pension as long as he/she lives. If the Participant dies first, the beneficiary receives 66 % percent of the pension for the rest of the beneficiary's life. If the beneficiary dies first, the Participant may elect another beneficiary or may continue to receive 100% of his/her pension and upon his/her death, benefits cease. [Section 2.424 (b) (2) a. 3.]

Partial Lump Sum Payment Option

A partial lump sum payment equal to either ten percent (10%), twenty percent (20%), or thirty percent (30%) of the actuarially determined value of the normal retirement benefit due the member may be elected in combination with any of the options indicated above. If a member elects such a partial lump sum distribution, then the monthly retirement benefit for the option selected shall be reduced accordingly thereafter. [Section 2.424 (b) (2) a. 4.]

I have considered the various benefit payment methods under such Plan and have elected to receive my retirement benefits as indicated below. (Note: Option selection to be indicated both by Number and Description.)

I understand that once my first pension check is received, my decision on this option is irrevocable.

If taking Option 1 sign below	:		*			
Option #: _1_	Description: _	Joint and Survivo	or Annuity			
Beneficiary's Signature:		***************************************		***	_	
Dependent children under the a	age of 18 and re	siding in my househo	old are:			
Child's Name		Gender (M-F)	Date of Birth	Social	Security#	
					_	
If taking Option 2 sign below						
		Life Annuity				
Beneficiary's Signature:			Date:	W. W	_	
If taking Option 3, fill in bene						
		10 Year Certain a		у		
The designated beneficiary is:						
Name:		Social Secur	rity Number:	W		
Date of Birth:		Gender (Circ	cle One) M I	F		
Address:						
Phone Number:		Relations	ship			
Beneficiary's Signature:			Da	ate:		-

	fill in Option Number, Description and beneficiary information and sign below:				
Option #:	Description: 100 % Joint and Survivor Annuity				
The designated beneficiary is	5:				
Name: Sharon Fo	Social Security Number:				
Date of Birth: ひん‐ 3o‐					
Address: 2028 Bre	ndla Road Clearwater, FL 33755				
Phone Number: 727-95	3-3867 or 288-3715 Relationship Wife				
Beneficiary's Signature:	hon 7 ahon Date: 06/12/17				
If taking a Partial Lump Sur	m Payment, fill in Percentage and sign below:				
Option #: NA	Description: Partial Lump Sum Payment				
I elect to take a partial lump s	sum payment in the following amount (check only one):				
10% of the actuari	ally determined value of the normal retirement benefit				
20% of the actuaria	ally determined value of the normal retirement benefit				
30% of the actuaria	ally determined value of the normal retirement benefit				
I understand my monthly retirement benefit for the option selected above shall be reduced accordingly.					
I understand my monthly retir	rement benefit for the option selected above shall be reduced accordingly.				
I understand my monthly retir Beneficiary's Signature:	rement benefit for the option selected above shall be reduced accordingly. Date:				
Beneficiary's Signature:					
Beneficiary's Signature: STATE OF FLORIDA COUNTY OF	Date: The foregoing instrument was acknowledged before me this				
Beneficiary's Signature:	The foregoing instrument was acknowledged before me this				
Beneficiary's Signature: STATE OF FLORIDA COUNTY OF	Date: The foregoing instrument was acknowledged before me this				
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City of Clearwater Employees' Retirement System Benefit Estimate

Member Data

Name : **ROBERT FAHEY**

Social Security No.

Date of Birth : 07/24/1964

Age at Retirement : 52 Years 11 Months 8 Days

Beneficiary Data

Name : SHARON FAHEY Social Security No.

Date of Birth : 06/30/1970

Age at Retirement : 47 Years 0 Months 1 Day Relationship : Spouse

of children under 18 : 0

Option Elected

Retirement Data

Pension Start Date : 01/28/2002 Calculation Type : Estimate

Termination Date : 06/10/2017 Benefit Group : Non-Hazardous - Tier II

Effective Date : 07/01/2017 Retirement Type : Other Pre-Retirement Death

FAC : \$ 77,622.06

Pre-Tax Contributions : \$ 0.00 Partial Lump Sum : \$0.00 (0 %)

Post-Tax Contributions : \$ 0.00 Total Member Service : 15 Years 4 Months 12 Days

Formula for Benefit A : 2.75% * 10.925 years * \$77,622.06

Monthly Benefit

Form of Payment	Factor	To Member	Potential To Beneficiary
Normal Form	1.00000	\$1,943.38	N/A
Single Life Annuity	1.00000	\$1,943.38	N/A
10 Year Certain and Life Annuity	0.99131	\$1,926.49	N/A
50% Joint and Survivor	0.93972	\$1,826.23	\$913.12
66 2/3% Joint and Survivor	0.92120	\$1,790.24	\$1,193.50
75% Joint and Survivor	0.91222	\$1,772.79	\$1,329.59
100% Joint and Survivor	0.88629	\$1,722.40	\$1,722.40

Formula for Benefit B : 2.75% * 4.4417 years * \$77,622.06

Monthly Benefit

			Potential
Form of Payment	Factor	To Member	To Beneficiary
Normal Form	1.00000	\$790.10	N/A
Single Life Annuity	1.00000	\$790.10	N/A
10 Year Certain and Life Annuity	0.99137	\$783.28	N/A
50% Joint and Survivor	0.94028	\$742.92	\$371.46
66 2/3% Joint and Survivor	0.92192	\$728.41	\$485.61
75% Joint and Survivor	0.91301	\$721.37	\$541.03
100% Joint and Survivor	0.88728	\$701.04	\$701.04

This calculation is subject to correction. If you are or become aware of errors in the data that was used, the calculations that were made, or the plan provisions that were applied, it is your responsibility to contact the plan administrator. The plan has the right to recover from you amounts that were paid to you in error.