

5413

APPLICATION FOR VESTED RIGHTS PENSION

Laura Canary, being a person leaving employment with the City of Clearwater, Florida, and having completed ten (10) or more years of credited service, such service having occurred during the period from (date of entry into Pension Plan) March 22, 2004 to (date of resignation or change of status) April 13, 2018 hereby makes application to receive the vested rights pension provided for by the City Code of Ordinances. As such former employee, I understand the pension requested will be computed pursuant to the provisions of the City Code of Ordinance in effect on the date of resignation.

I hereby further certify that my date of birth is September 26, 1980.

The date I will begin to receive my pension will be April 1, 2034.

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.

Laura Canary
Signature

Administration/CRA Operations
Department/Division

Economic Development Coord.
Job Classification

Social Security Number

1985 HyVue Dr.
Street Address

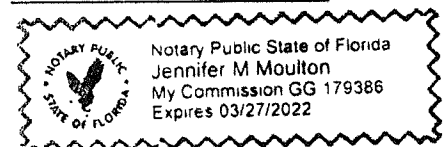
Clearwater, FL 33763
City, State, Zip Code

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 4th day of April, 2018 by Laura Canary who is personally known to me or who has provided FL DL as identification and who did/~~did not~~ take an oath.

Jennifer M. Moulton Notary Public
Jennifer M. Moulton Name of Notary Printed

My commission expires: _____



APPLICATION FOR VESTED RIGHTS PENSION

Christopher Hubbard, being a person leaving employment with the City of Clearwater, Florida, and having completed ten (10) or more years of credited service, such service having occurred during the period from (date of entry into Pension Plan) 7/27/06 to (date of resignation or change of status) 8/18/17 hereby makes application to receive the vested rights pension provided for by the City Code of Ordinances. As such former employee, I understand the pension requested will be computed pursuant to the provisions of the City Code of Ordinance in effect on the date of resignation.

I hereby further certify that my date of birth is December 3, 1980.

The date I will begin to receive my pension will be January 1, 2036.

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.

Christopher Hubbard

Signature

Parks & Rec/Admin

Department/Division

Recreation Specialist

Job Classification

Social Security Number

2818 Countryside Blvd #42

Street Address

Clearwater, FL 33761

City, State, Zip Code

STATE OF FLORIDA

COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 18 day of April, 2018 by Christopher Hubbard

who is personally known to me or who has provided

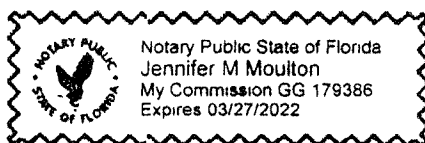
_____ as identification

and who did/did not take an oath.

Jennifer M. Moulton Notary Public

Jennifer M. Moulton Name of Notary Printed

My commission expires: _____



6385
(11)

APPLICATION FOR VESTED RIGHTS PENSION

Thomas R. Knobl, being a person leaving employment with the City of Clearwater, Florida, and having completed ten (10) or more years of credited service, such service having occurred during the period from (date of entry into Pension Plan) 10/31/05 to (date of resignation or change of status) 4/6/18 @ Midnight. hereby makes application to receive the vested rights pension provided for by the City Code of Ordinances. As such former employee, I understand the pension requested will be computed pursuant to the provisions of the City Code of Ordinance in effect on the date of resignation.

I hereby further certify that my date of birth is _____.

The date I will begin to receive my pension will be 11/25.

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]

Signature

Social Security Number

Fire/Op's

Department/Division

Street Address

FF/Driver operator

Job Classification

City, State, Zip Code

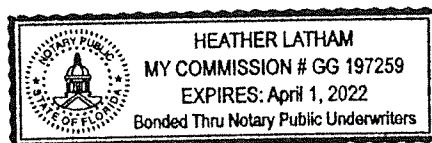
STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 2nd day of April, 2018 by Thomas R. Knobl who is personally known to me or who has provided _____ as identification and who did/did not take an oath.

Heather Latham Notary Public

Heather Latham Name of Notary Printed

My commission expires: 4.1.22



APPLICATION FOR VESTED RIGHTS PENSION

Martin Moran, being a person leaving employment with the City of Clearwater, Florida, and having completed ten (10) or more years of credited service, such service having occurred during the period from (date of entry into Pension Plan) Feb 28, 2000 to (date of resignation or change of status) March 30, 2018 hereby makes application to receive the vested rights pension provided for by the City Code of Ordinances. As such former employee, I understand the pension requested will be computed pursuant to the provisions of the City Code of Ordinance in effect on the date of resignation.

I hereby further certify that my date of birth is _____

The date I will begin to receive my pension will be March 1, 2020

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.

Martin Moran
Signature

Social Security Number

Fire / Administration
Department/Division

Street Address

Administrative Support Manager
Job Classification

City, State, Zip Code

STATE OF FLORIDA
COUNTY OF PINELLAS

RECEIVED
CITY OF CLEARWATER

APR 05 2018

PAYROLL DIVISION

The foregoing instrument was acknowledged before me this 5th day of April, 2018 by Martin Moran who is personally known to me or who has provided _____ as identification and who did/did not take an oath.

Michelle Kutch Notary Public

Name of Notary Printed

My commission expires: _____



Michelle Kutch
NOTARY PUBLIC
STATE OF FLORIDA
Comm# FF988036
Expires 5/23/2020