APPLICATION FOR VESTED RIGHTS PENSION

7.	
such service having occu	being a person leaving employment with the and having completed ten (10) or more years of credited service, arred during the period from (date of entry into Pension Plan) te of resignation or change of status)
Ordinances. As such form pursuant to the provisions	ner employee, I understand the pension requested will be computed of the City Code of Ordinance in effect on the date of resignation.
	my date of birth is November 17, 1968.
The date I will begin to reco	eive my pension will be <u>December 1, 2023</u>
contributions that I paid in	fy that I have made no application seeking to obtain a return of the to the Pension Fund during the period of my employment set forth nvicted of a felony during my period of employment, and I have not pension from the City.
Signature	Social Security Number
Engineering Control Department/Division	
Contracts and Projection Job Classification	on Largo 12 33770 City, State, Zip Code
STATE OF FLORIDA	
COUNTY OF PINELLAS	
	The foregoing instrument was acknowledged before me
	by means of ⊠physical presence or □ online notarization,
	this 28th day of June, 2021
	by Laura Davis
	who is personally known to me or has produced
	as identification.
	Jennifer M. Mou Ho (Name of Notary Printed)
	- in the state of
	Commission No.
Rev. 3/2020	Notary Public State of Florida Jennifer M Moulton My Commission GG 179386 Expires 03/27/2022 Vested Pension Form

RECEIVED CITY OF CLEARWATER JUL 06 2021

APPLICATION FOR VESTED RIGHTS PENSION

PAYROLL DIVISION

ADAM A. K	RAFT	, 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 occi	urred during	the period from (date of entry into Pension Plan) tion or change of status)
hereby makes application	to receive the	e vested rights pension provided for by the City Code of
Ordinances. As such form	ner employee	e, I understand the pension requested will be computed
pursuant to the provisions	of the City Co	ode of Ordinance in effect on the date of resignation.
I have be fourth or continue that	my data of h	irth io
I hereby further certify that		
The date I will begin to rec	eive my pens	sion will be May 1, 20 26.
Further, I additionally certi	fy that I have	e made no application seeking to obtain a return of the
contributions that I naid in	to the Pension	on Fund during the period of my employment set forth
above, I have not been eq	hvicted of a	felony during my period of employment, and I have not
received any other type of	pension non	Title City.
Signature		Social Security Number
Police/Ps	tro/	
Department/Divis		Street Address
·		• •
Job Classificati	on	City, State, Zip Code
JOD Classificati	OH	City; Clare, Elp of the
STATE OF FLORIDA		
COUNTY OF PINELLAS		
	The foregoin	ng instrument was acknowledged before me
	by means o	f ঐ physical presence or □ online notarization,
	this (1)	day of $()$ $()$ $()$ $()$ $()$ $()$ $()$ $()$
	by Ala	The Road of
	110	onally known to me or has produced
	WHO IS PELSO	as identification.
		as identification.
	0.0	n l l
	(hring	Motary Public (Signature)
	1	ka l
	<u>('hr/so</u>	nn K Gerg Kroc (Name of Notary Printed)
	Commission	Chrisann K. Gerakios
	COMMISSION	Notary Public State of Florida
		Comm# GG984064

Expires 6/22/2024

APPLICATION FOR VESTED RIGHTS PENSION

_	
Jeremy Wil	heing a person leaving employment with the
City of Clearwater, Florida	, and having completed ten (10) or more years of credited service,
such service having occu	urred during the period from (date of entry into Pension Plan)
bereby makes application to	te of resignation or change of status) $\frac{9}{17}$ $\frac{202}{202}$ to receive the vested rights pension provided for by the City Code of
Ordinances. As such form	her 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 11/7/1979.
The date I will begin to rece	eive my pension will be December 1, 2034
	fy that I have made no application seeking to obtain a return of the
contributions that I paid in	to the Pension Fund during the period of my employment set forth
	nvicted of a felony during my period of employment, and I have not
received any other type of	pension from the City.
	Social Security Number
Information	Technology 1473 S. Fredrica Are
Department/Divis	ion Street Address
Info Technoli	ogy Mar Clearwater FL 33756
Job Classification	
OTATE OF ELOPIDA	
STATE OF FLORIDA	
COUNTY OF PINELLAS	
	The foregoing instrument was acknowledged before me
	by means of ♠ physical presence or ☐ online notarization,
	this 2573 day of August, 2021
	by Jeremy Williams
	who is personally known to me or has produced
	as identification.
,	Monte M. Montet Notary Public (Signature)
	Jemisfer M. Moulton (Name of Notary Printed)
	Commission No.
	Notary Public State of Florida Jennifer M Moulton
Rev. 3/2020	My Commission GG 179386 Vested Pension Form Expires 03/27/2022