

DALLAS EMPLOYEES' RETIREMENT FUND DEFERRED RETIREMENT BENEFITS

Name	SS#
Address	
City	State
Zip Code	
Telephone ()	Birth Date

Name of Spouse	Birth Date
Date of Marriage	Place Recorded

DEPENDENT CHILDREN UNDER THE AGE OF 18 (include legally adopted)		
Name	Date of Birth	Place born

Next of Kin (other than spouse, prefer local address)		
Name		
Address		
City	State	Zip Code
Telephone ()		

OFFICE USE ONLY		
Current Age _____	Eligible Retirement Age _____	Birth Certificate - member _____
Years of Pension Service _____	Disability Coverage Yes No	Birth Certificate - spouse _____
SURVIVOR OPTION _____	Designee Form Yes No	Marriage License _____
Last Working Day _____	Ordinance No. _____	Year _____