

ST. LUCIE COUNTY FIRE DISTRICT
FIREFIGHTER'S RETIREMENT FUND

MEMBER'S ELECTION OF BENEFIT OPTION

I, _____, have received the calculation of my retirement benefit options and I elect retirement benefits payable under the following option (initial one):

_____ **NORMAL FORM, TEN YEAR CERTAIN AND LIFE ANNUITY** - These monthly benefits are paid to the retiree until death. If the retiree dies before 10 years from the date of retirement, the benefits continue to the surviving beneficiary for the balance of the 10 year period. (If the retiree lives beyond the 10 year period, no benefits will be paid to the surviving beneficiary upon the retiree's death.)

MONTHLY AMOUNT \$ _____ **Initial** _____

_____ **LIFE ANNUITY** - These benefits are paid to the retiree for as long as he or she lives.

MONTHLY AMOUNT \$ _____ **Initial** _____

_____ **JOINT AND SURVIVOR** - These monthly benefits are paid to the retiree until death. At death, the applicable percentage will continue to the retiree's joint annuitant until his or her death. Percentage (initial one): _____100% _____75% _____66-2/3% _____50%

Name of Joint Annuitant _____

MONTHLY AMOUNT \$ _____ **Initial** _____

Date

Signature