

Puget Sound Electrical Workers 401(k) Savings Plan

Physical Address 7525 SE 24th Street, Suite 200, Mercer Island, WA 98040 • Mailing Address PO Box 34203, Seattle, WA 98124
Phone (206) 441-4667 or (866) 314-4239 • Fax (206) 505-9727 • Website www.psestrusts.com

Administered by
Welfare & Pension Administration Service, Inc.

APPLICATION FOR RETIREMENT (Alternate Payee)

1. Name _____ 2. Social Security No. _____

3. Address _____
Street City State Zip Code

4. Home Phone No. (____) _____ 5. Birth Date* _____
*NOTE: Attach copy of documentary proof of age as specified on the reverse.

6. Marital Status: Single Married

7. Name of Beneficiary _____ Relationship _____

Address of Beneficiary _____
Street City State Zip Code

8. Please enter the following information regarding your former spouse (if known):

Name _____ Birth Date _____ Social Security No. _____

9. Is your former spouse currently retired and receiving benefits? Yes No

Enclosed herewith is a copy of my Birth Certificate and proof of any and all of my name changes.

Signature: _____

Date: _____

NOTARIZATION:

Subscribed and sworn to before me

this _____ day of _____, 20 _____

Notary Public's Signature: _____

Notary Public in and for the State of _____

Residing at _____

Commission expires: _____