



# San Joaquin County Employees' Retirement Association

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## REQUEST FOR ESTIMATE

Please complete this form and return it to SJCERA to receive a retirement benefit estimate. Please remember these are estimates and certain circumstances could change the final benefit. (For example: Leave of Absence, Purchase of Service, Recent and Future pay increases) ***Please allow about 2 weeks for processing.***

### ***Required Information:***

Name: \_\_\_\_\_

SSN or Employee ID: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Estimated Retirement Date (limit 3): \_\_\_\_\_

Beneficiary's Name: \_\_\_\_\_

Birthdate of Beneficiary: \_\_\_\_\_ Relationship: \_\_\_\_\_

Date of Marriage/Registered Domestic Partnership: \_\_\_\_\_

Email Address where to send these projections:

\_\_\_\_\_

No email? Please give us a mailing address where to send these projections:

\_\_\_\_\_

\_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_