

NEW ENGLAND TEAMSTERS & TRUCKING INDUSTRY PENSION FUND

MONTHLY PAYMENT ELECTION FORM

Applicant's Name: _____ S.S. # _____
(please print)

Spouse's Name: _____ S.S. # _____
(please print)

SECTION I – REJECTION STATEMENT FOR MARRIED PARTICIPANTS

I understand that my spouse and I must complete this SECTION I before a Notary Public because I have rejected the Husband and Wife form of payment on my application for benefits or in SECTION II of this form.

PART A - APPLICANT'S REJECTION STATEMENT - I hereby swear that I am legally married and do not wish to receive my pension benefit in the form of a Husband and Wife Annuity. I understand that the rejection of the Husband and Wife form of payment means that no benefits will be paid after my death, unless benefits are payable pursuant to my election of the 120 Certain Payment Option. I hereby swear that the person signing the Spouse Consent Statement in Part B below is my current legal spouse.

Applicant's Signature: _____ Date: _____

State of _____

SS:

County of _____

On the _____ day of _____, 20____ before me came _____
to me known and known to me as the person described in and who executed the foregoing statement and (s)he duly acknowledged to me that (s)he executed the same.

_____ Notary Public

PART B - SPOUSE'S CONSENT STATEMENT - I hereby swear that I am the legal spouse of the applicant described above and hereby consent to my spouse's rejection of the Husband and Wife Pension. I understand that I will not be paid a pension from the Pension Plan after my spouse's death unless I am designated as the Beneficiary under the 120 Certain Payments option. I further recognize that because of this rejection, the pension paid to my spouse while (s)he is living will be at least 15% higher than it would be if I had the survivor protection.

Spouse's Signature: _____ Date: _____

State of _____

SS:

County of _____

On the _____ day of _____, 20____ before me came _____
to me known and known to me as the person described in and who executed the foregoing statement and (s)he duly acknowledged that (s)he read the above Spouse Consent Statement and executed the same on his/her free act and deed.

_____ Notary Public

I understand that the elections made on this Election form will supersede and replace all prior elections made by me on any and all Application(s) or Election Form(s) previously completed by me and on file at the Pension Fund Office.

SECTION II – ELECTION STATEMENT FOR MARRIED PARTICIPANTS

I understand that if the Single Life Annuity is elected, my spouse and I must complete SECTION I of this form before a Notary Public. If the Single Life Annuity is elected, my pension will be paid for my lifetime only.

I/We elect to receive my pension in the following form of payment (Check YES or NO for each option):

- A. Single Life Annuity YES _____ NO _____
- B. Husband and Wife Annuity YES _____ NO _____
- C. Pop-up option in conjunction with the Husband and Wife Annuity YES _____ NO _____
- D. Form of Husband & Wife Annuity (if applicable) 50% _____ 75% _____ 100% _____

Applicant’s Signature: _____ Date: _____

Spouse’s Signature: _____ Date: _____

PART III – PAYMENT ELECTION FOR UNMARRIED PARTICIPANTS

I hereby swear that I am not legally married at this time and will submit proof upon request. I understand that my pension will be paid in the form of a Single Life Annuity and that no benefits will be paid after my death, unless remaining benefits are payable pursuant to my election of the 120 Certain Payments Option.

Applicant’s Signature: _____ Date: _____

PART IV – ELECTION OF OPTIONS FOR ACTIVE PARTICIPANTS

I elect the following option(s): (check YES or NO for each option):

- A. CHRISTMAS BENEFIT OPTION (7% reduction) YES _____ NO _____
- B. 120 CERTAIN PAYMENTS OPTION (10% reduction) YES _____ NO _____

I understand that a separate Authorization Form must be completed for each option. The 120 Certain Payments Option is not available with a Statutory Pension and may not be elected in conjunction with the Husband and Wife Annuity.

Applicant’s Signature: _____ Date: _____