

## QUESTIONNAIRE FOR DEFERRED VESTED RETIREES – ALL MEMBERS

- Are you now working for the City of Los Angeles in any capacity?
  YES\_\_\_\_\_ NO\_\_\_\_\_
  If Yes, you may not be able to retire while still employed by the City of Los Angeles.
- When y ou t erminated em ployment w ith t he C ity of L os A ngeles, w ere you r eceiving your highest salary while employed by the City of Los Angeles? YES\_\_\_\_\_ NO\_\_\_\_\_ If No, When? \_\_\_\_\_\_
- 3. Did you have any Part-Time service with the City of Los Angeles? NO \_\_\_\_\_ YES \_\_\_\_\_ If Yes, When? \_\_\_\_\_
- Did you ever work for the Department of Water and Power (DWP)?
  NO\_\_\_\_\_ YES\_\_\_\_ If Yes, When?\_\_\_\_\_
- 5. Are you paying off a Service Credit Purchase contract that began prior to your termination of employment?

NO\_\_\_\_\_YES\_

Note: If Yes, prompt payment will help speed the processing of your case. Note: Please try to pay off your contract at least 2 weeks before your retirement date. You cannot beg in a contract after your termination date.

- Did you previously work for another government agency?
  YES\_\_\_\_\_ NO\_\_\_\_
  If yes, please discuss possible reciprocity options with your counselor.
- Do you have reciprocity with another government agency within California? NO\_\_\_\_\_ YES\_\_\_\_ DON'T KNOW \_\_\_\_\_ Note: There are s pecific c onditions f or r eciprocity. T he r etirement dat e m ust be t he s ame for al I reciprocal systems. Please discuss with your retirement counselor if this applies to you.
- 7a. If yes, are you on active payroll with any reciprocal agency? NO\_\_\_\_ YES\_\_\_\_
- 8. Were you on Worker's Compensation for more than one year during your City employment and did you ever received temporary disability payments (state rate)?

NO\_\_\_\_\_ YES\_\_\_\_ If Yes, When?\_

Note: S ervice c redit do es not ac crue dur ing periods for w hich y ou received " state rate" payments. You cannot begin a contract for purchase of "state rate" after your termination date.

9. Do you have a c urrent wage as signment or g arnishment b eing d educted from any wages? NO\_\_\_\_\_ YES\_\_\_\_

Note: Some wage garnishments may continue on your LACERS retirement allowance.



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- 10. Do you have Larger Annuity Funds on account with LACERS? YES\_\_\_\_NO\_\_\_\_ DON'T KNOW\_\_\_\_\_ If yes, your funds on account cannot remain with LACERS once you have retired. Please discuss your options with the retirement counselor.
- 11. Are you qualified to receive Social Security Benefits? NO\_\_\_\_\_YES\_\_\_\_DON'T KNOW \_\_\_\_\_ Note: You may be eligible to receive Social Security Benefits if you have 40 or more quarters in the Social Security System. There may be an offset if you receive a government pension. Check with the SSA at (800) 772-1213.
- 12. Are you eligible to receive Medicare Part A?

NO\_\_\_\_\_YES\_\_\_\_DON'T KNOW

Note: You may be el igible to receive Medicare Part A if you have 40 or more quarters in the Social Security System. All retirees will be eligible for Medicare Part B, upon reaching age 65. The Social Security Administration will charge you for the Medicare benefit. LACERS will only reimburse retirees who are covered by both Part A and Part B, and are enrolled in a LACERS medical plan.

## <u>Please provide LACERS with a letter of eligibility from the</u> <u>Social Security Administration if you are age 65 or over.</u>

13. Do you plan to move to another State in the near future?

NO\_\_\_\_\_ YES\_\_\_\_ If Yes, When?\_

Note: You may wish to meet with a LA CERS Health Advocate to discuss your Health and Dental Insurance Options and /or reimbursement eligibility.

Member's Signature	Social Security Number	Date Signed

## ADA NOTICE

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodations to ensure equal access to its programs, services, and activities.