

**FORM A
APPLICATION TO BEGIN PENSION BENEFIT PAYMENTS**

Benefits may begin on the first of the month following your 65th birthday, as long as you are vested or actively serving a ministry that is contributing to your pension account. You may begin receiving your pension benefit as early as age 62 with a penalty of 0.5% benefit reduction for each month received early. No additional employer contribution payments will be accepted after you begin receiving your pension benefit. Benefit payments will not be backdated earlier than the date this form is received.

Name _____
FIRST / MIDDLE / LAST

DATE OF BIRTH _____ **SOCIAL SECURITY #** _____ - _____ - _____
MONTH / DAY / YEAR

ADDRESS _____
STREET

CITY STATE/PROVINCE ZIP

CELL PHONE _____ **ALTERNATE PHONE** _____

EMAIL _____

Spouse (if applicable)

If you have a Qualified Domestic Relations Order (QDRO) that applies to your pension benefit payment, please include a copy.

NAME _____
FIRST / MIDDLE / LAST

DATE OF BIRTH _____ **SOCIAL SECURITY #** _____ - _____ - _____
MONTH / DAY / YEAR

DATE OF MARRIAGE _____
MONTH / DAY / YEAR

Have you previously selected a higher surviving spouse benefit? Yes No

If yes, what percent did you choose? 75% 100% DATE CHOSEN _____

(NOTE: If you have chosen a higher surviving spouse benefit (75 or 100%) using the Surviving Spouse Benefit Form D, you must do so not less than 2 years prior to retirement (early or regular.), otherwise physician's statement of good health is required. If you are unsure whether you have elected an option other than the automatic 65%, please contact Covenant Benefits.)

Signature _____ I would like my pension to begin _____
MONTH / DAY / YEAR

Form B (service record) and Form C (bank information request) must also be returned to begin pension benefit payments