

**MEBA PENSION TRUST  
ELECTION TO RECEIVE LUMP SUM  
ACTUARIAL EQUIVALENT OF PENSION BENEFIT**

**SECTION 1: Basic Data**

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Please Print)

DATE OF BIRTH: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

**SECTION 2: Lump Sum Distribution Election (please choose only one)**

I hereby elect to receive my Pension in the form of a 100% Lump Sum

-or-

I hereby elect to receive my Pension in the form of a Combined Benefit Option (50% Lump Sum & 50% Monthly Annuity).

**IF YOU SELECT THE COMBINED BENEFIT OPTION, YOU MUST SELECT ONE OF THE MONTHLY OPTIONS BELOW:**

(\_\_\_) 100% Regular Survivor Option                      (\_\_\_) 50% Regular Survivor Option

(\_\_\_) 100% Pop-Up Survivor Option                      (\_\_\_) 50% Pop-Up Survivor Option

(\_\_\_) Single Life Annuity                                      (\_\_\_) 75% Regular Survivor Option

By choosing to receive my Pension Benefit in the form of a 100% Lump Sum or a Combined Benefit Option (50% Lump Sum and 50% Monthly Annuity), I understand that my Money Purchase Benefit (*if applicable*) will be made as a single distribution (lump sum).

I understand that this election will be effective only if:

1. I meet all the requirements for a Lump Sum Distribution as outlined in the Plan Regulations; and
2. My spouse consents to my election in writing and waives his/her rights to any other form of benefit within 90 days from my Effective Date of Pension; and
3. The Plan's Actuary certifies that the actuarial requirements specified in the Plan Regulations have been met; and
4. I file this Election Form with the Plan office in Baltimore, MD, at least two years prior to my Effective Date of Pension. The two-year filing requirement will be waived if I submit a Statement of Health substantiating that I meet the Plans insurability provision (Section 2A.17 (c) of the Pension Plan Regulations).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**MAIL THIS ELECTION FORM TO:  
MEBA PENSION TRUST  
1007 EASTERN AVENUE  
BALTIMORE, MD 21202-4345**