
SERVICE RETIREMENT APPLICATION

Having met the requirements for service retirement, I hereby apply for such retirement from the service of the City of Los Angeles.

Name: _____

SSN: _____

Effective Date of Retirement: _____

Dept/Bureau: _____

Home Address: _____

Telephone Number: Home: _____ Work: _____

Signature

Date

WITHDRAWAL NOTIFICATION

Application for retirement can be withdrawn through the day prior to the effective date of your retirement. Written withdrawal requests **MUST** be submitted by mail, in person, or by fax to (213) 687-4174 and **MUST** be received by LACERS no later than midnight on the night before your effective date of retirement.

Signature

Date