



To: Pension Plan Participant

From: The Finance Department

The following information is required to prepare the benefit calculation for retirement. If you have any questions, please contact the Finance Department at (860) 668-3851. This completed form should be mailed to:

Town of Suffield  
Finance Dept.  
83 Mountain Rd.  
Suffield, CT 06078

Or emailed to: [ARusilowicz@suffieldct.gov](mailto:ARusilowicz@suffieldct.gov)

Name of Employee: \_\_\_\_\_

Employee Social Security Number: \_\_\_\_\_

Employee Date of Birth: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Spouse's Social Security Number: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_

Anticipated Date of Retirement: \_\_\_\_\_

Employee Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-mail address if you would like the pension calculation emailed to you:

\_\_\_\_\_