



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: amoore@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: _____

Daytime Phone Number: _____

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