

pef-retirees/benefits-for-pef-retirees to learn more.

PEF Retirees Renewal & Pension Deduction Form

In order to participate in any of the benefits offered through the PEF Retirees and the PEF Membership Benefits Program*, you must be a dues-paying PEF retiree member—so make sure you <u>renew</u> your PEF Retiree Membership today!

RENEW YOUR PEF RE	<u>TIREES MEMBERSHIP AN</u>	ND INDICATE BELOW	<u>/, Your Method</u>	OF PAYMENT:		
	Ilment Form and Pension omatic payment of your your				• •	
Please make your o	/year) :heck payable to "PEF Reti	irees".				
RETURN YOUR COMPLETED FORM (AND CHECK, IF APPROPRIATE) TO:			1168-70 Tro	PEF Retirees 1168-70 Troy-Schenectady Road PO Box 12414, Albany, NY 12212-2414		
	PE	F RETIREE MEMB	ER RENEWAL			
Last Name:		First Name:		Middle Initial:		
Street Address:		City:	State:	Zip:	County:	
()	()					
Telephone No.:	Cell Phone No.:	F	Retirement Date:			
New York State & Local Retirement (NYSLRS) ID#			Social Security Nun	ocial Security Number:		
Email: By providing your email savings, promotions, and more.	address, you give PEF, PEF Retirees, a	and the PEF Membership Benej	fits Program, permission to	communicate with yo	u regarding new benefit offers, specia	
	TE PUBLIC EMPLOYEES FED ding your signature below, initia					
amount necessary to cover men the union certifies to the Retiree.	Retirement and Social Security Law, I nbership dues and/or insurance prer s System as necessary in the amoun y, or revoke deductions must be subi	miums payable on my behalf t t of such dues or insurance pre	to the NYS Public Employed miums. I understand that	es Federation Retirees. A the NYS Public Employ	cal Retirement Systems in the Authorization is provided for changes ees Federation Retirees are my agent by me by written notice through the	
Retiree's Signature:	etiree's Signature:			Date:		
To participate in all benefits o	ffered through the PFF Membershi	ip Benefits Program, except to	he voluntary insurance h	enefits, vou must he a	n active, dues-paving PEF retiree	

(518) 785-1900, Ext. 288 | (800) 342-4306, Ext. 288 | www.pefretirees.org

and you must have been an active, dues-paying PEF member at some point in your working career—a qualifying criteria that is verified during your initial enrollment. *PEF Retiree members with no prior dues-paying member participation in PEF, are entitled to participate in the following benefits: PEF Retiree Dental Program, PEF Retiree Vision Program, Hear in America, and the following PEF MBP benefits: Auto/Home/Renters Insurance, Voluntary Legal Service Plan, Pet Insurance, Cambridge Credit Counseling, CarePatrol, Connect America, Dignity Memorial Funeral Benefit, Low-Cost College Benefit, and much more. (Look for benefits denoted by an asterisk.) Visit pefmbp.com/