

RETIRED MEMBERS

I hereby authorize the Pension Fund staff to release sensitive information to the following *personal* email address. The emails may include physical addresses, social security numbers and dates of birth. I understand the Pension Office does not have a secure email. This will remain in place until is revoked in writing below. The cover email will not be protected so no confidential information will be sent to you, nor should you reply with any confidential information to us.

 □ I Authorize Sending DROP Statements By Email □ I Authorize Sending Affidavits By Email □ Mortgage Verification Letters 	
Email Address (Please Print)	
Signature	Date
Witness	_
☐ Please change my current email addr	ress listed above to the following email.
Email Address (Please Print)	
☐ I hereby revoke the authorization for to the following email address.	the Pension Fund staff to release information
Email Address (Please Print)	_
Signature	Date
Witness	_