



Employees' and Elected Officials' Retirement Systems 7 East Redwood Street, 13th Floor Baltimore, Maryland 21202-3470 Phone: 443-984-3200 Fax: 443-853-3767 Member Self-Service Portal: bcers.org (Member Services)

REQUEST FOR ESTIMATE OF RETIREMENT BENEFITS

It may take as long as 60 days for the Retirement Systems to provide this estimate.

		/ DAY				FOR ERS USE ONLY	
Date of Request:	MONTH		/ YEAR			PENSION #	
Name:			MIDDLE	E INITIAL I	LAST		
Address:							
CITY		STATE				ZIP	
Is this a change of	address? □	Yes 🗖	No				
Phone Number: ()		Last I	Four of SS	SN:		
Estimated Date of R	etirement: _	MONTH	/ DAY	/ YEAR			
Age at Estimated Da	ate of Retirer	nent:					
Type of Retirement	(please chec	k one):					
☐ Service		_ine-of-Dι	uty Disa	bility		☐ Non-Line-of-Duty Disability	
Beneficiary Name: _							
Beneficiary Date of Birth:				Relationship:			
SPECIAL INSTRUC	TIONS:						