

Municipal Employees' Retirement System of Louisiana
7937 Office Park Boulevard, Baton Rouge, LA 70809
225-925-4810 / Toll Free 1-800-820-1137 / Fax 225-925-4816

RETIREMENT/DROP ESTIMATE REQUEST

Check one: Retirement DROP Early Disability

Name: _____
PLEASE PRINT CLEARLY

Social Security Number (last 4 digits only): _____

Retirement/DROP Date: _____

Effective date of estimate is always the 1st of the month and must be at least 2 months from today's date.

Employing Municipality: _____

Current Address: _____

Automatic COLA option calculation Yes No

Did you participate in DROP? Yes No

If yes, date DROP participation ended: _____

Contact Phone Number: _____

Mail to above address: Yes No

Mail to municipality: Yes No

Member's Signature

Date

Complete all blanks as accurately as possible. Mail completed form to the above address or fax to 225-925-4816 and please allow 4-6 weeks for your estimate.

Fee schedule: 1st Estimate - No Charge
 2nd Estimate - \$50.00
 3rd Estimate and thereafter - \$100.00
 Expedited Estimate (to receive immediately add \$50.00)
 Make checks payable to MERS.