

**RETIREMENT DOCUMENT CHECKLIST**

\_\_\_\_\_  
Name

- 1. Notification from Fire Department \_\_\_\_\_
- 2. Copy of Drivers License \_\_\_\_\_
- 3. Copy of Marriage License (If Applicable) \_\_\_\_\_
- 4. Drop Application and Election \_\_\_\_\_
- 5. Distribution Election Form \_\_\_\_\_
- 6. Optional Retirement Annuity Election \_\_\_\_\_
- 6. Withholding Notice \_\_\_\_\_
- 7. Direct Deposit Form \_\_\_\_\_
- 8. City of Austin Medical Insurance Y N  
\$ \_\_\_\_\_
- 9. City of Austin Dental Insurance Y N  
\$ \_\_\_\_\_
- 10. HELPS Enrollment Form \_\_\_\_\_
- 11. Home Phone Number \_\_\_\_\_
- 12. Home Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 13. Month of 1<sup>st</sup> Annuity Check \_\_\_\_\_

***If payment has not been received by the 28<sup>th</sup> of the month,  
please contact the pension office***