



Teachers' Retirement System of Louisiana
8401 United Plaza Blvd, Ste 300 • Baton Rouge, LA 70809-7017
P.O. Box 94123 • Baton Rouge, LA 70804-9123
Telephone: (225) 925-6446 • Fax: (225) 925-4779
www.trsl.org

Form 10 (02/15)

03-10

Benefit Estimate Request

To receive a retirement benefit estimate, print the information requested below and return completed form to Teachers' Retirement System of Louisiana. An estimate will be sent to your mailing address below. Please allow four to six weeks for a response.

NOTE: An incomplete or improperly completed form will be returned to you. Please allow four to six weeks for processing after TRSL has received the necessary information. Please see TRSL's booklet "Planning for Your Retirement" for more detailed information on preparing for your retirement or DROP participation. TRSL uses an average of your highest (three or five, depending on membership date) consecutive reported earnings to compute your estimate of retirement benefit or DROP deposit amount.

Current salary projections and leave conversions are not considered for estimates. Estimates are computed based on information already provided to TRSL by your employer(s).

Name _____ Social Security number

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Date of birth ____ / ____ / _____ Email address _____
Street / PO Box _____ City, state, zip _____
Work telephone (____) _____ - _____ Home telephone (____) _____ - _____

If you are interested in beneficiary options, please complete the following:

Beneficiary name(s) _____ Beneficiary date of birth ____ / ____ / _____
Gender _____ Relation _____
(Date of birth not needed if more than one beneficiary is listed.)

Projected date of retirement: ____ / ____ / _____
(Must be within 36 months)

Type of retirement benefit estimate desired:

- ☐ Service
- ☐ Initial Lump-Sum Benefit (must meet eligibility requirements for DROP)
- ☐ Disability retirement: Minor children? ☐ Yes ☐ No *If Yes, provide youngest child's date of birth. ____ / ____ / _____*
- ☐ Deferred Retirement Option Plan (DROP) - (entering DROP)
- ☐ Retirement (after DROP)

2.5% Annual COLA Option (ACO)

The ACO is a new retirement option that allows a retiring member to receive a guaranteed annual 2.5% cost-of-living adjustment (COLA) by accepting an actuarially reduced retirement benefit. Please check the box below **only** if you are interested in receiving a benefit comparison estimate.

☐ 2.5% Annual COLA Option

I hereby understand that the figures I will receive are estimated and subject to change once final employer certifications are received when I retire.

Signature _____ Date of request ____ / ____ / _____

Visit www.trsl.org to use the benefits calculator for an unofficial estimate.

SEND COMPLETED FORM TO: ATTENTION: Retirement Department
Teachers' Retirement System of Louisiana
PO Box 94123
Baton Rouge LA 70804-9123