BOARD OF TRUSTEES OF THE POLICE PENSION FUND OF THE CITY OF DES PLAINES, ILLINOIS

REQUEST FOR TRANSFER OF SERVICE CREDIT

Name of Police Officer:	
IHEREBYREQUEST that the Des	Plaines Police Pension Board initiate a request for
me to transfer my service credit from _	
[Name of Previous Department] to the	Des Plaines Police Pension Fund. I served on the
other department from	, to,
[insert dates]. I did/did no	t [circle one] take a refund of my contributions from
the other department. I understand that I v	will receive notification as to the amount, if any, I will
have to contribute to effectuate the transf	er of service credit.
Cignoture of Doline Officer	
Signature of Police Officer	* * * * *
FOR OFFICE USE ONLY:	****
Received this request on	,
Sent to Board Attorney for process	ing on,
Board Officer	

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