

			FIT ELECTION NOTICE DUNT OPTION
Applicant:	SHARON PALLADIN	O	Date of Birth:
SSN:	AMERICAN AND AND AND AND AND AND AND AND AND A		Years of Service:
Address:			
Phone:	(home)	(cell)	
Email:			
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CHAPTER 3.28	LY FOR BENEFITS FROM TO C. PART 23 OF THE SAN JO TM DISTRIBUTION		TY EMPLOYEES' RETIREMENT SYSTEM UNDER ODE (CHECK ONE).
LI LUMP SU	M DISTRIBUTION		
	MONTHLY PAYMENT OF DATE IS THE DATE APPLICATE		OW FFICE OF RETIREMENT SERVICES)
	TS ARE IN ACCORDANCE V b. FL 015883 FILED IN SA		ON AND ORDER RE: DIVISION OF RETIREMENT Y.
	PAYMENT IS INITIATED US		OMESTIC RELATIONS ORDERS" AND UNDERSTAND THAT I SELECT, MY ELECTION BECOMES
SIGNATURE	Sycontilion	alladino	
DATE	PEOGLALY		
		MEMBER INFO	
MEMBER NAME	: ANTHONY PALLADINO	CLASSIFICATION:	WASTEWATER MAINTENANCE SUFI
		TOTAL YEARS OF	SERVICE
STATUS:			A.