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This application is to be used by a Fire Pension Fund to obtain transfer of employee contributions previously paid to the IMRF. These employees are now members of the Fire Pension Fund. **Only contributions which were made for full-time firefighting service may be transferred.**

Name of Municipality						Employer IMRF ID#			
Formation date of Fire Pension Fund						Date of this application			
Month		Day		Year		Month		Day	Year

MEMBERS OF FIRE PENSION FUND WITH IMRF SERVICE CREDITS

Employee Name			Social Security No.	Dates of Firefighting Service to be transferred
Last	First	Initial		

I hereby apply for the transfer of employee contributions from the Illinois Municipal Retirement Fund for the employees and periods of service indicated and certify that these employees are members of the Fire Pension Fund, and all the service indicated was as a full-time firefighter.

Signature of the President of the
Board of Trustees of the Fire Pension Fund

Mailing address for the Fire Pension Fund

Please PRINT full name signed above.