



To: Pension Plan Participants

From: Debbie Cerrato

The following information is required to prepare the benefit calculation for retirement. If you have any questions, please contact me at 860 668-3851. This completed form should be mailed to:

Town of Suffield  
Finance Dept.  
Attn: Deborah Cerrato  
83 Mountain Rd.  
Suffield, CT 06078

Or emailed to: [dcerrato@suffieldtownhall.com](mailto:dcerrato@suffieldtownhall.com)

Name of Employee: \_\_\_\_\_

Employee Social Security Number: \_\_\_\_\_

Employee Date of Birth: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Spouse's Social Security Number: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_

Anticipated Date of Retirement: \_\_\_\_\_

Employee Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-mail address if you would like the pension calculation emailed to you:

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