



NMI SETTLEMENT FUND

POST OFFICE BOX 501247, SAIPAN, MP 96950

APPLICATION FOR RETIREMENT ANNUITY

I HEREBY APPLY FOR RETIREMENT ANNUITY PAYABLE UNDER THE APPLICABLE NMI RETIREMENT FUND LAWS AND REGULATIONS PURSUANT TO THE SETTLEMENT AGREEMENT ENTERED IN *JOHNSON V. INOS*, CIVIL CASE NO. 09-00023, IN THE DISTRICT COURT FOR THE NMI:

1. FULL NAME (First, Middle, Last)		2. U.S. SOCIAL SECURITY NUMBER / /	
3. CURRENT MAILING ADDRESS		4. DATE OF BIRTH / /	
5. RESIDENTIAL ADDRESS (Only if you live in the CNMI) Street Name Village		6. CONTACT NUMBERS HOME: WORK: CELL:	
7. MARITAL STATUS <input type="checkbox"/> Married* <input type="checkbox"/> Single <input type="checkbox"/> Divorced** <input type="checkbox"/> Widowed *Provide copy of official marriage record if none on file. **If Divorced, provide Divorce Decree and Final Judgment certified by the issuing court if none on file.		8. E-MAIL ADDRESS (By providing an email address, you consent to service of documents, including, but not limited to, forms, certifications, 1099-R, and correspondence, by email.) <input type="checkbox"/> Mark if you would also like documents sent by mail.	
9. NAME OF SPOUSE (First, Middle, Last)	10. DATE OF BIRTH / /	11. U.S. SOCIAL SECURITY NUMBER / /	
12. SPOUSE'S CONTACT INFORMATION HOME: WORK: CELL: E-MAIL ADDRESS:			
13. LIST UNMARRIED CHILD(REN), AGES 17 YEARS AND UNDER. START WITH OLDEST CHILD.			
NAME OF CHILD	DATE OF BIRTH	IS CHILD DISABLED? DATE DISABLED	
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	
14. IF THE CHILD(REN) NAMED ABOVE IS/ARE NOT LIVING WITH YOU, PLEASE COMPLETE THE FOLLOWING:			
NAME OF CHILD	NAME, ADDRESS, AND CONTACT NUMBER OF LEGAL GUARDIAN	RELATIONSHIP	

15. IN SUPPORT OF THIS APPLICATION, I HEREBY SUBMIT THE FOLLOWING DOCUMENTS:	
NEW RETIREE	
	Service Computation Data from Personnel Office
	Earnings Records from Division of Revenues and Taxation, Form W-2 (for all years in government service)
	All Personnel Actions, including for resignation, retirement, completion, or termination (if not on file)
	Most Current Payroll Check Stub/Statement
	Official Marriage Record (if married)
	Divorce Decree (if divorced)
	Documents Supporting Disability for Child Before 18 Years of Age (if applicable)
	Birth Certificates (Self/Spouse/Children 17 years of age and under)
	Election for Five-Year Credit Under Article III, Section 20(b) of the NMI Constitution (if applicable)
RETIREE WHO COMPLETED/TERMINATED GOVERNMENT REEMPLOYMENT	
	Earnings Records from Division of Revenues and Taxation, Form W-2 (for all years in government service if not on file, including all periods of reemployment)
	All Personnel Actions, including for resignation, completion, or termination (if not on file)
	Most Current Payroll Check Stub/Statement
	Official Marriage Record (if married, and not on file)
	Divorce Decree (if divorced, and not on file)
	Documents Supporting Disability for Child Before 18 Years of Age (if applicable)

By submitting this application, I understand the following:

1. All supporting documents must be submitted for a complete application. Failure to submit any or all supporting documents will be deemed an incomplete application and will not be processed for review until such time supporting documents are submitted.
2. Once an application is complete, documents will go through a compliance and legal review. Benefits will be processed upon completion of such review.
3. Any person who knowingly makes any false statement, or falsifies any record in an attempt to defraud the Settlement Fund is guilty of a misdemeanor, and shall be punishable under the laws of the Commonwealth of the Northern Mariana Islands. The Settlement Fund shall have the right to recover any payments made under false representations. I affirm that all information I have given on this document is true and correct to the best of my knowledge.

Signature of Applicant

Date