# UPS/IBT Full-Time Employee Pension Plan and Central States Pension Fund Retirement Processing Request Form

SUBMIT TO:
**retirementdept@ups.com**
**or MAIL TO:**
**UPS/IBT Full-Time Pension Plan**
**55 Glenlake Pkwy, NE, Atlanta, GA 30328**

**1. Indicate (X) the type of request**

| Retirement Estimate | Retirement Application (within 90 days of retirement) |
|---|---|
| | |

**2. Indicate (X) the type of request.**
Qualified Domestic Relations Order or Divorce Decree that governs the division of your pension benefit with your former spouse.

| Yes | No |
|---|---|
| | |

**3. Please provide the following demographic information.**

| Full Name Address and Phone Number | Employee ID and SSN | Region/ District # | Date of Birth | Date of Termination* |
|---|---|---|---|---|
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| | | | | |
| Email Address | | | | |

***Last day on payroll, last day considered a UPS employee.**

**4. Please provide beneficiary information for the Joint and Survivor Benefit forms of payment.**
*This section is required for married participants.*

| Spouse's Full Name Address - Check here if same ☐ | Spouse's Social Security # | Spouse's Date of Birth |
|---|---|---|
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**5. Please provide children's information:**

| Children's Full Name | Address | Date of Birth |
|---|---|---|
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**6. Please indicate if you were ever a Participant in any other Teamster Pension Fund as an employee of any other Employer (not UPS):** Yes ☐ No ☐

If yes please provide the following details below. Central States will contact you to ensure that your credit is correctly reflected in their records.

| Name of Employer | Name of Pension Fund | Local # and Name |
|---|---|---|
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