



PENSION INCOME VERIFICATION REQUEST

I am a retiree in the Christian Brothers Employee Retirement Plan. With this form, I am requesting that you provide me with a letter indicating how much I receive per month, the date of my retirement, my benefit election, and the duration of my payments. Please complete and return this form to our office for processing.

Retiree Name: _____

Address: _____

(new address)

Phone: _____

Please return my request to provide me with Pension Income Verification using the following method of communication:

Mail Email Fax

Please confirm email address or fax number: _____

Signature: _____
(electronic signature is accepted)

(Last 4 of SSN)

Submit your request to our office using one of the following methods:

Fax: 630.378.2507

Email: rpscustomerservice@cbservices.org

Mail: CBERP
1205 Windham Parkway
Romeoville IL 60446-1679