									SECTION 4 IDENTIFYING INFORMATION						
Notice of Petirement and										SECTION 1 – IDENTIFYING INFORMATION 1. Social Security No.					
Notice of Retirement and										300 18	ii 060	unity	INO.		
Request for Service Needed										2. Name					
for Eligibility									3. [3. Date Released				4. BA No.	
5. Railroad Name and Address										6. Payroll Number					
									7. Job Title						
										8. Work Location					
Facsimile Number: ()									9. Department or Division						
10. RRB Filing Date 11. Date Last Worked (Last day								12. Date Rights Relinquished (if applicable)							
	on payroll as employee)									(applicable <i>)</i>					
SECTION 2 - EMPLOYER INSTRUCTIONS - PLEASE READ THE "IMPORTANT NOTICES" ON THE NEXT PAGE.															
This employee filed an application for an annuity and has informed the RRB that (s)he relinquished employment rights (if applicable) and stopped working on the date shown in Item 11.															
Complete Item 13 below only if the date in Item 11 differs from the date carried on the payroll.															
 Always complete Items 14 and 16. Fax this form to (312) 751-7192 or mail to the address shown on the top of the next page within 10 days. The 															
employee cannot be awarded an annuity until we receive this information. If you have any questions, telephone the Quality Reporting Service Center at (312) 751-4992.															
									Day Year						
13. Last day on payroll as employee Month								itti	Day			Teal			
14. Indicate with an "X," months the employee had service. The "Current Year" refers to the year shown in Item 11. "Prior Year" is the year before. If this form will be submitted before your annual report for the prior year, complete items about the prior year as well.															
items about the prior	J	F	M	Α	М	J	J	Α	s	0	N	D		Total Months	
Current Year	J	'	IVI		IVI	J	J		3	0	IN	D		Total Worths	
Prior Year															
15. REMARKS															
SECTION 3 - EMPLOYER CERTIFICATION															
16. The information in this report is correct to the best of my knowledge and belief.															
Signature										Date					
Title										Telephone No.					
Facsimile No.								E-Mail Address							
()	()														
NOTE: IF EMP	LOYE	EE RE	ETUR	NS T	O C	ЭМР	ENS/	TED	SER	VICE	NO	TIFY	THE RR	RB IMMEDIATELY.	

U.S. RAILROAD RETIREMENT BOARD 844 N RUSH STREET CHICAGO, IL 60611-2092 May be used for window envelope if folded properly.

IMPORTANT NOTICES

PAPERWORK REDUCTION ACT NOTICE

The Railroad Retirement Board's (RRB) authority for requesting this information is Section 9 of the Railroad Retirement Act (RRA). The information requested is needed and used by the RRB to determine your employee's eligibility for a retirement annuity under Section 2 of the RRA (45 U.S.C. Sec. 231A). Furnishing this information is required by law (Section 7(b)(6) of the RRA (45 U.S.C. 231F(B)(16)).

We estimate this form takes an average of 5 minutes per response, including the time for reviewing the instructions, getting the needed data, and reviewing the completed form. Federal agencies may not conduct or sponsor, and respondents are not required to respond to a collection of information unless it displays a valid OMB number. If you wish, send any comments regarding the accuracy of our estimates or any other aspects of this form, including suggestions for reducing the completion time, to the Chief of Information Management, Railroad Retirement Board, 844 North Rush Street, Chicago, IL 60611-2092.