

**LAY EMPLOYEE'S AGE 56 THROUGH 66  
WITH SEVEN YEARS VESTED  
REQUEST FORM FOR PENSION ESTIMATE**

**ESTIMATES FOR TERMINATION/RETIREMENT WITHIN THE NEXT 3 YEARS**

**ARCHDIOCESE OF GALVESTON-HOUSTON**

Date \_\_\_\_\_

**REQUIRED INFORMATION**

Social Security #:	-   -	Date of Birth:
Name:		
Address:		
City:	State:	Zip:
E-mail:	Phone:	
Emergency Contact:	Phone:	
<b>SIGNATURE</b>		

You may request 3 estimates. Please state what age (56 through 66) and date you want to retire:

At age/or date \_\_\_\_\_ At age/or date \_\_\_\_\_ At age/or date \_\_\_\_\_

**First**—you need an Earnings History Statement from the Social Security Administration. To get the statement online go to [www.socialsecurity.gov](http://www.socialsecurity.gov). Create an account, click on View Earnings and print. Or, go to any Social Security Office and request an SEQY report. **These reports are FREE.**

ARCHDIOCESAN PARISH, SCHOOL, OR DEPARTMENT NAME	DATE OF HIRE	DATE OF TERMINATION

**PLEASE RETURN TO:**

**Archdiocese of Galveston-Houston  
Pension Office  
P.O. Box 907  
Houston, TX 77001-0907  
(713)-652-8222**

**PLEASE NOTE:** **Only request estimates if you are age 56 through 66 with 7 years vested** and allow **8 to 10 weeks for your reply.** Your reply will be sent to the address given above. This inquiry is strictly confidential.