

City of Gainesville
DISABILITY PENSION PLAN
Application for Pension

Leg. No. 100651

To: The CITY COMMISSION

Application for pension under the City of Gainesville Disability Pension Plan is hereby made for:

Name: Cynthia L Sandoval Employee ID #: 7797
Application Date: 10/26/10 Effective Date: _____
Pension Service Date: 9/5/94 Date Of Birth: 10/25/53
Position: GRU - Customer Service Rep SR
Department: GRU Customer Service
Address: 1439 SE 43 PL City: Gainesville
State/Zip: Florida 32641 Phone #: 352-379-7380

Line of Duty Not in the Line of Duty

STATEMENT OF DISABILITY: Breast Cancer

You are advised that if after retirement has been approved and/or benefits paid it is determined that the initially projected or actually paid benefit amount was higher or lower than the member, retiree, or beneficiary was entitled to, then such benefit may be adjusted so as to provide the actuarial equivalent of the benefit to which the member, retiree, or beneficiary was entitled.

You are also advised that you must comply with all reasonable requests of the City of Gainesville to recertify annually your eligibility to receive pension benefits as provided in Section 2-527(m) of the City of Gainesville Code of Ordinances.

It is a crime for a person willfully and knowingly to make any false, fraudulent or misleading oral or written statement or withholds or conceals material information to obtain any benefit available under this plan.

Signature of Member

Date

State of Florida

County of _____

The foregoing instrument was acknowledged before me this _____ day of _____ (month), _____ (year), by _____ (name of person acknowledging).

(Signature of Notary) (Seal of Notary)

(name of Notary, printed, typed, or stamped)

Personally known OR produced identification Type of identification produced _____

REVIEWED BY:

Original Signature on File
Department Head

Special Authority

Disability Review Committee Recommendation:

Approve **Deny**
(Circle one)

Original Signature on File
City Manager
Disability Review Committee

Approved 1/13/11
Date of Meeting

City Commission Action:

Approval **Denial**
(Circle one)

Mayor