

LARGER ANNUITY PROGRAM ELECTION TO CHANGE INVESTMENT OPTION OR TERMINATE BIWEEKLY CONTRIBUTIONS - ALL MEMBERS

_____		_____		_____	
(Print) Last Name		First Name		Middle Name	
_____		_____		_____	
Street Address		City	State	Zip Code	
_____		_____	____/____/____	_____	
_____		_____		_____	
Last four digits of Social Security Number		Email	Date of Birth	Daytime Phone Number	

Change Investment Option to: (Please initial)

1. _____ Interest credited monthly is the same as that credited to regular member contributions and is based on the Five-year Treasury note.

2. _____ Investment return on account based on the net-of-fees return of the publicly-traded portion of LACERS investment portfolio. **The rate of return may be positive or negative.**

I understand the following:

- *My entire Larger Annuity account will be transferred to the new investment option as of the next monthly valuation (interest or return posting) after this completed form is received by LACERS; and*
- *I can only change my investment option once per year.*

Termination of Biweekly Deduction: (Please initial)

_____ Please terminate my biweekly deduction to LACERS Larger Annuity Program.

_____	_____
Member's Signature	Date

For LACERS Use Only

Verified by _____ Date _____

Date of last change (if any) _____ (Only one investment option change per year is allowed)

ADA NOTICE

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodations to ensure equal access to its programs, services and activities.