

514 South McDonough Street P O Box 2186 Montgomery, AL 36102-2186

Phone: 334-242-4079

Fax: 334-242-4072

Toll Free: 1-888-350-4079

Web Site: www.apoabf.alabama.gov

Email: john.hixon@apoabf.alabama.gov

RETIREMENT BENEFITS

<u>Service Retirement</u> - Based on years of service-minimum 15 years qualified service and age 52 – maximum benefits 30 years regardless of age - eligible to retire with 25 years qualified service regardless of age.

Years Qualified Service	Monthly Benefit
15	\$103.75
16	110.00
17	116.25
18	122.50
19	128.75
20	135.00
21	141.00
22	147.50
23	153.75
24	160.00
25	166.25
26	176.00
27	185.75
28	195.50
29	205.25
30	215.00

DISABILITY & DEATH BENEFITS

<u>Disability Benefits</u> - If a member is injured in the line of duty, has a heart attack or heart condition, and is totally or permanently disabled; they may receive benefits payable up to 24 months.

Qualified Service	Monthly Benefit
Not more than 35 months	\$72.00
36 through 47 months	108.00
48 through 59 months	144.00
60 months or more	180.00

Any member disabled as defined in this section for a period of more than twentyfour (24) calendar months shall be eligible for retirement benefits under this article if he meets the requirements of Section 36-21-70, Retirement Benefits.

<u>Death Benefits</u> – \$2,500.00 death benefit is paid to the current beneficiary(s) named on the account at the time of death. <u>If killed in the line of duty, all contributions are returned in addition to the \$2,500.00</u>. There are no other survivor benefits. The \$2,500.00 death benefit is also retained after retirement.

MEMBERSHIP REQUIREMENTS

Membership Contributions - \$30.00 per month payable by the 10th day of each month. (Effective September 1, 2015)

Some departments have payroll deductions for the fund. After thirty years service/membership, the monthly contributions are discontinued; however, benefits cannot be paid until retired from law enforcement.

- 1. Membership effective month of enrollment and payment of contribution.
 - Previous law enforcement service can be purchased at full <u>actuarial cost.</u>
- 2. If you terminate your employment as a law enforcement officer, you may elect to leave your money in the Fund for a maximum period of 36 months. If at the end of that time you have not returned to Peace Officer employment, your contributions will automatically be refunded and your membership service closed. This refund is 90 percent of your total contributions. After refund Must rejoin as a new member with no claim to any previous service. However, should you return to peace officer work within the 36 month period without receiving a refund, you may activate your membership by starting your contributions again and have a letter of reemployment sent to the Fund's office stating that you are employed as a full time peace officer with powers of arrest and the date.
- 3. If your account is terminated due to non-payment of contributions, you can only rejoin as a new member with no claim to, or repayment of, your Qualified Service prior to termination. May rejoin as a new member only.
- **4.** If you wish to terminate your membership or you leave law enforcement, you may, upon request, receive <u>90 percent</u> of your total contributions.

FUND FINANCING

- 1. An actuarial study is required every three years for determining the soundness of the Fund and consideration of any increase in benefits as proposed by the Board Members. Any increase in benefits or changes must be recommended by the Actuary and presented to and passed by the Legislature to be enacted.
- 2. Monies to maintain the Fund come from a cost levied against fines in the City and County courts; membership Fees; and return from investments.
- 3. Accountability for all income and expenses Audited by State Examiners of Public Accounts.
- 4. Available upon request is the complete Legislative Act creating the Fund.

Inquiries should be directed to:

Alabama Peace Officers Annuity & Benefit Fund P O Box 2186 Montgomery, AL 36102-2186

Physical Address: 514 South McDonough Street

Montgomery, AL 36104

Telephone: 334-242-4079 or 1-888-350-4079

Fax : 334-242-4072

Website : www.apoabf.alabama.gov

STEPS NECESSARY TO JOIN

The Alabama Peace Officers' Annuity & Benefit Fund

- 1. Completed application, have your signature notarized, and your employment certified by your Sheriff, Chief of Police, or Legal Appointing Authority. If your beneficiary is a minor; by laws governing the Fund, you must furnish in writing the name, address, and social security number of a <u>legal guardian</u> (other than yourself) who would act on the minor's behalf.
- 2. Copy of your birth certificate or current valid driver license to verify proof of birth.
- **3.** Copy of P.O.S.T. (Peace Officers' Standards & Training) Affidavit or copy of P.O.S.T. certificate.
- **4.** If your employer does not offer payroll deduction or you choose for your membership to be effective quickly, please attach a \$30.00 (effective September 1, 2015) check or money order to your application.
- 5. If you are interested, Act 2001-1100 allows active and contributing members to repurchase qualified service time as a full time peace officer in Alabama at the full actuarial cost (based on figures to be determined by the Fund Actuary). Please contact our office if you wish to purchase this option.

FORM 1 (Rev. 2013)

334-242-4079 1-888-350-4079 fax - 334-242-4072

ALABAMA PEACE OFFICERS' ANNUITY & BENEFIT FUND

Post Office Box 2186 (514 South McDonough Street) Montgomery, Alabama 36102-2186 www.apoabf.alabama.gov

APPLICATION FOR MEMBERSHIP

1. Full	Name				
	(first)	(middle)	(last)	(sex)	
2. Hon	ne Address				
	(street)	(town)		(county) (zip)	
	Daytime Phone Number				
		Date of Birt			
NOT	E: Your date of birth must be ve	erified by a valid copy of your birth	certificate or driver's licens	e included with application	
4. Pres	ently Employed by				
		(Name of State Department, Co.	unty, or Municipality)		
5. Date	e your present employment bega	n	Job Title		
6. By v	vhom are you paid?	7. How many hours per week do you normally work?			
8. Nan	ne of Beneficiary in case of death				
Dat	e of birth	SS#	Relationship		
Ren	eficiary Address			•	
		laws governing the Fund, you much	n furnish in writing the name	e, address and SS# of a leg	
	an (other than yourself) who wo				
	Legal Guardian	Address		SS#	
	you have legal power and authori	ty to make arrests? king time to the duties of an arresti	ng officer?		
		her official papers?			
			-		
12. W	nat is your primary duty?	General Law Enforcement, Guardin	g Prisoners Jailor etc)		
		General Law Emoreement, Guardin	g i risoricis, sanor, etc,		
12 4-	and the state of t	FOR PRISON EMPLOYEES			
		to guard prisoners during all your w to guarding prisoners, list these:			
(DATH: I do hereby certify tha	t the information furnished is tr	ue and correct to the bes	t of my knowledge.	
Date	: Applic	ant's Signature			
	Subscribed and sworn before	e me this Day	of	20	
	Notary Public Signature _				
MPLOY	ER CERTIFICATION This is	to certify that	was em	ployed on	
with		as a full-time,	duly sworn peace officer, po	ossessing powers of arrest.	
	(State Department, County, or N		,		
Date:	Signatu	re by			
			or, Executive Director, Com	missioner) (Title)	

NOTE: An affidavit or graduation certificate from Alabama Peace Officers' Standards & Training must be included with application.