

# THE PRE-RETIREMENT SEMINAR

United Nations Joint Pension Fund

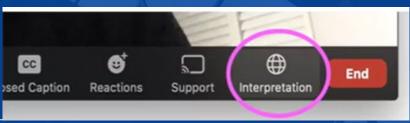
23 September 2025

Q&A

www.slido.com

Event code 3214907

Select your preferred language







# ILO PRE-RETIREMENT SEMINAR

CLIENT SERVICES and OUTREACH Bangkok, Geneva, Nairobi, New York

23<sup>rd</sup> September 2025

#### **DISCLAIMER**



 This presentation is made available for the convenient information of the UNJSPF participants, retirees and other beneficiaries.

 Should there be any ambiguity or inconsistency between the information provided herein and the UNJSPF Regulations, Rules and Pension Adjustment System, any decisions will be based on the appropriate provisions contained therein.

Should this presentation be provided by staff other than the staff of the UNJSPF, any
ambiguity or inconsistency should likewise be clarified either with the appropriate provisions,
or through communications with the staff of the Fund.

# What we will cover in this presentation



#### 1. THE PENSION ADJUSTMENT SYSTEM

Purpose

Mechanism 1: Cost of Living adjustment

Mechanism 2: US Dollar track vs Two track

#### 2. PAYMENTS - GENERAL INFORMATION

#### 3. UNJPS WEBSITE

#### 4. MEMBER SELF SERVICE

#### **5. ESTIMATE and FORMS**



#### **PURPOSE:**

To preserve the purchasing power of a pension from inflation and, where applicable, from currency fluctuations.



# WHICH BENEFITS are adjusted?

# > ALL periodic benefits:

- ✓ Normal retirement
- ✓ Early retirement
- ✓ Disability or surviving spouse benefit
- ✓ Child Benefit
- ✓ Secondary benefit
- ✓ Deferred retirement .... only as of age 55!

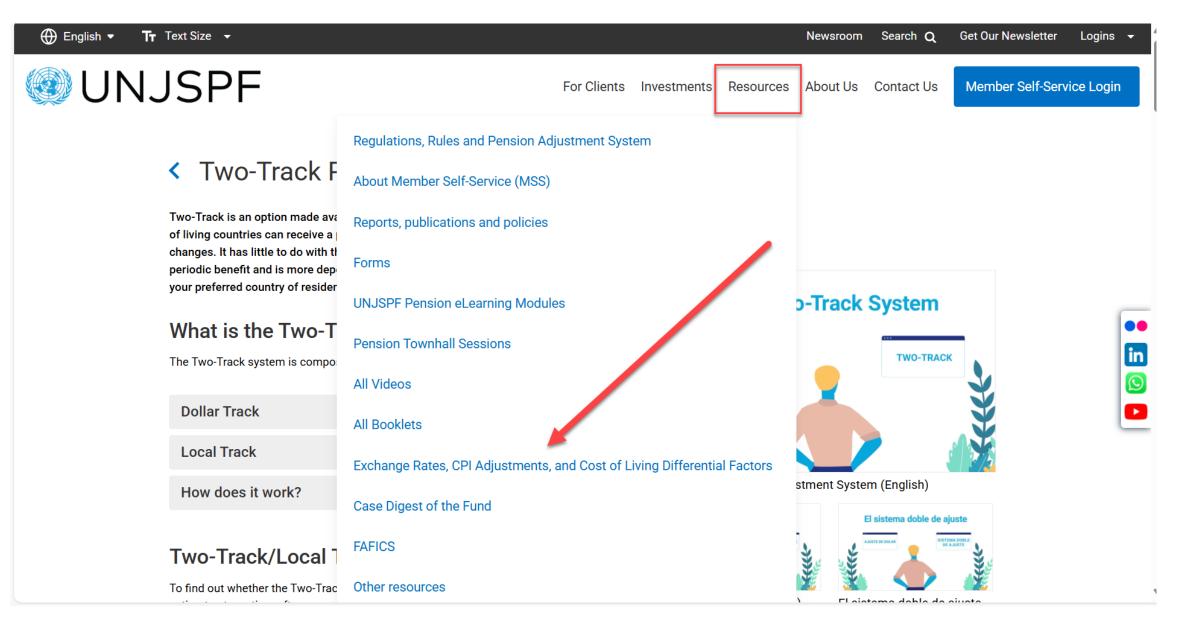




## FREQUENCY OF ADJUSTMENT

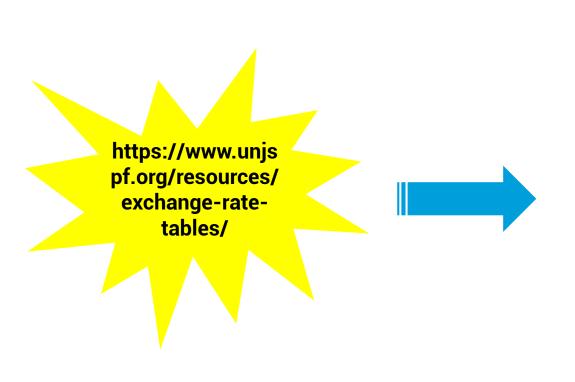
- Annually, on 01 April, if the relevant consumer price index\* moved by at least 2% since the date of the last adjustment.
- > Semi-Annually, on 01 April and on 01 October, if the consumer price index moved by 10% or more since the April adjustment during the same year. (October 2024: Türkiye (24.7%), Egypt (16.5%), Haiti (14.0%), Malawi (10.0%))
  - \* CPI are from the Monthly Bulletin of Statistics. (Statistics Division of the Department of Economic and Social Affairs (UN DESA) of the UN Secretariat
  - ✓ The first adjustment will be reduced by 0.5 percent.
  - √ Adjustments can be also negative







#### HISTORICAL CONSUMER PRICE INDEX (CPI), EXCHANGE RATE



# Exchange Rates, CPI Adjustments, and Cost of Living Differential Factors

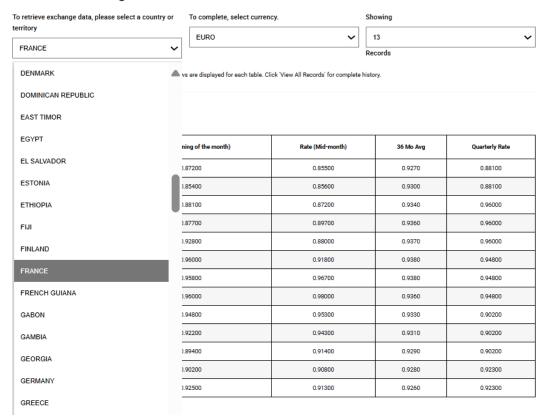
Welcome to the Pension Exchange Rates! Please select your country or territory to begin.

CPI = Consumer Price Index

COL = Cost of Living Differential

If you are experiencing issues with loading data, please clear the cache on your browser.

#### Pension Exchange Rate Tables





HISTORICAL CONSUMER PRICE INDEX (CPI), EXCHANGE RATE



#### **FRANCE**

#### **CPI Adjustment**

Showing 13 Records

Effective Date	Adjustment
April 2024	3.7
April 2023	5.8
April 2022	2.8
April 2020	3.1
April 2018	2.1
April 2014	2.1
April 2012	2.4
April 2011	3.7
April 2008	2.6
April 2007	3.2
April 2005	2.1
April 2004	2.1
April 2003	3.7



HISTORICAL CONSUMER PRICE INDEX (CPI), EXCHANGE RATE: Example

PERIOD	AMOUNT	COL ADJ %	ADJUSTED AMOUNT
31/03/2005	1,000.00		
Apr-06	1,000.00	3.4% - 0.5% = 2.9%	1,029.00
Apr-07	1,029.00	2.5	1,054.73
Apr-08	1,054.73	4.1	1,097.97
Apr-10	1,097.97	2.8	1,128.71
Apr-12	1,128.71	4.5	1,179.50
Apr-14	1,179.50	3.2	1,217.25
Apr-17	1,217.25	3.6	1,261.07
Apr-18	1,261.07	2.2	1,288.81
Apr-20	1,288.81	4.2	1,342.94
Apr-22	1,342.94	8.6	1,458.43
Apr-23	1,458.43	6.4	1,551.77
Apr-24	1,551.77	3.4	1,604.53
Apr-25	1,604.53	4.4	1,675.13



#### US DOLLAR TRACK vs TWO TRACK

USD TRACK	TWO TRACK
<ul> <li>DEFAULT Position</li> </ul>	OPTIONAL (once retired)
- COST OF LIVING OF USA	COST OF LIVING IN COUNTRY OF RESIDENCE
ENTITLEMENT IN USD	ENTITLEMENT IN LOCAL CURRENCY
OPTION TO CHANGE TO THE TWO TRACK AT ANY TIME	<ul> <li>NO REVERSION TO USD TRACK POSSIBLE         NORMALLY (Exception :         ✓ if the country is suspended from the two-track         system         ✓ Aberrant results: Reversion of individual retirees is         reviewed on a case-by-case basis)</li> </ul>



#### US DOLLAR TRACK vs TWO TRACK

USD TRACK	TWO TRACK
<ul> <li>NO NEED TO SUBMIT PROOF OF RESIDENCE TO UNJSPF</li> </ul>	<ul> <li>PROOF OF RESIDENCE REQUIRED (including each time you move country of residence) - See Pens.</li> <li>E/10 &amp; E/11 forms and Examples of acceptable- POR and supporting doc. (Link) unjspf.org)</li> </ul>
CONVENIENT TO CHANGE COUNTRY OF RESIDENCE (no changes to benefit amount)	CHANGE OF COUNTRY OF RESIDENCE ENTAILS RECALCULATION OF BENEFIT AMOUNT



#### US DOLLAR TRACK vs TWO TRACK

USD TRACK	TWO TRACK
CURRENCY OF PAYMENT (among 18) INTO ACCOUNT/BANK OF YOUR CHOICE	<ul> <li>CURRENCY OF PAYMENT (among 18) INTO ACCOUNT/BANK OF YOUR CHOICE</li> <li>Recommendation: Keep the currency of payment the same as the currency of your country of residence (if possible) to avoid fluctuations</li> </ul>
<ol> <li>US Dollar</li> <li>Euro (EUR)</li> <li>Swiss Franc (CHF)</li> <li>Pound Sterling (GBP)</li> <li>Canadian Dollar (CAD)</li> <li>Australian Dollar (AUD)</li> <li>New Zealand Dollar (NZD)</li> <li>Singapore Dollar (SGD)</li> <li>Japanese Yen (JPY)</li> </ol>	10. Danish Krone (DKK) 11. Norwegian Krone (NOK) 12. Swedish Krone (SEK) 13. Indian Rupee (INR) 14. Pakistani Rupee (PKR) 15. CFA Franc (XAF and XOF) 16. Chilean Peso (CLP) 17. Peruvian Nuevo Sol (PEN) 18. Russian Rouble



#### PAYMENT FLUCTUATION

TRACK (calculation)

(USD 1,000 per month) Conversion at the UN Quarterly Rate

#### Payment in 18 Payroll Currencies (your choice)

1 APR

MAY-JUN-JUL

**CURR** 

1 71 11	MAI OON OOL
1.000	1,000.00
0.914	914.00
0.875	875.00
0.785	785.00
1.353	1,353.00
1.533	1,533.00
1.665	1,665.00
1.349	1,349.00
145.570	145,570.00
6.812	6,812.00
10.537	10,537.00
10.799	10,799.00
82.730	82,730.00
303.946	303,946.00
599.485	599,485.00
599.485	599,485.00
855.000	855,000.00
3.685	3,685.00
95.942	95,942.00
	0.914 0.875 0.785 1.353 1.533 1.665 1.349 145.570 6.812 10.537 10.799 82.730 303.946 599.485 599.485 855.000 3.685





PAYMENT MECHANISM on TWO TRACK – SUMMARY VIDEO





What should I do if I might want to go on the Two-Track?

- Familiarize yourself with the "Two- Track" booklet on the web BEFORE you make a decision.
- Run an estimate of your Two Track benefit inside your Member Self Service (MSS), once your benefit is in payment.
- ➤ After you retire, contact the UNJSPF for detailed information and a discussion with a pension expert
- ➤ DO NOT MAKE A HASTY DECISION, on the basis of one quarter of fluctuation. Look at trends! The decision is IRREVOCABLE

Think about your future BEFORE you make a decision.







What should I do if I might want to go on the Two-Track?

#### **ACCESS** the specific "Two-Track" topic on the UNJSPF Website:

<u>Two-Track Pension Adjustment System - UNJSPF</u>(English) or, <u>La double filière - UNJSPF</u> (French)

#### **BOOKLET** – From the UNJSPF Website under "Resources" in three languages:

https://www.unjspf.org/wp-content/uploads/2024/03/Two-Track-EN.pdf (English) or

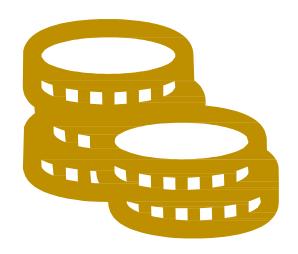
https://www.unjspf.org/wp-content/uploads/2024/03/Two-Track-FR.pdf (French)

https://www.unjspf.org/wp-content/uploads/2017/10/brochure-two\_track2010\_spa.pdf (Spanish)

#### **TUTORIAL** — Videos on Two-Track available on the UNJSPF Website under "Resources":

https://www.youtube.com/watch?v=zE0iSMh-ddg (English) or,

https://www.youtube.com/watch?v=y8PYHOID9kl&list=PLbv57VCEBszrlrBUmq-6i7sk2AHyFKwJl&index=19 (French)





#### PAYMENT GENERAL INFORMATION

- Weekly Payments: All payments made outside the Monthly Payroll run.
- They consist of:
  - Lump Sum
  - Withdrawal Settlements
  - Residual Settlements
  - Retroactive Benefits
  - Re-issuance of Returned/Cancelled payments
  - Payment of suspended and withheld payments

Value Date for WEEKLY PAYMENTS (= date when the Fund authorizes the banks to release the payments): Every Thursday



#### PAYMENT GENERAL INFORMATION – LUMP SUM

#### **LUMP SUM PAYMENT**

CURRENCY CHOICE BY BENE PF CALC & PAYMT

CONVERSION
BY PF BANKS

@Bank Rate

CURRENCY RECEIVED BY BENE BANK



























#### PAYMENT GENERAL INFORMATION – MONTHLY PAYMENT

- > All payments are made in arrears: April 2025 benefits are payable at the end of April 2025.
- ➤ Value Dates for MONTHLY PAYMENTS (date when the Fund authorizes the banks to release the payments)
- ➤ All Monthly pensions in USD payments to USA are paid on the last business day of the month (April 2025 pensions were paid on 30 April 2025)
- All other monthly pensions are paid the day before the last business day of the month (April 2025 pensions were paid on 29 April 2025)
- > Change of bank account : Up to twice a year
- All Cheque payments are dated the first of the following month (April 2025 payments by cheques are dated 01 May 2025)



#### PAYMENT GENERAL INFORMATION – MONTHLY PAYMENT

- ➤ Each Pension payment must be made by bank transfer to only one bank account owned or co-owned by the beneficiary.
- ➤ The Pension benefit cannot be split voluntarily by the beneficiary. It can be split to comply with a legal obligation to pay maintenance to a former spouse in case of divorce (Article 45)
- ➤ Two separate benefits belonging to the same beneficiary (e.g. pension + survivor's benefit) can be paid together as a single payment (aggregate feature) or separately to two different bank accounts.



#### PAYMENT GENERAL INFORMATION – MONTHLY PAYMENT

- Child/ren benefit/s can be paid separately to a bank account owned by the staff, the child or jointly held.
- > Normally, all monthly pensions are paid each month...
- ➤ ...However, **SMALL PENSIONS** (USD400 or less per month) can be paid in arrears quarterly, semi-annually or annually at the request of the beneficiary. The payments will be withheld and released automatically at the end of each cycle.

Note: This option is not compatible with ASHI deductions!



#### PAYMENT GENERAL INFORMATION – MONTHLY PAYMENT



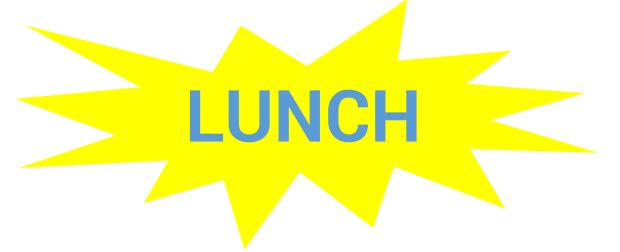
Currency denomination of your account determines how you receive your funds. **Your bank** will convert all funds received to the currency of your account.



#### PAYMENT GENERAL INFORMATION – MONTHLY PAYMENT







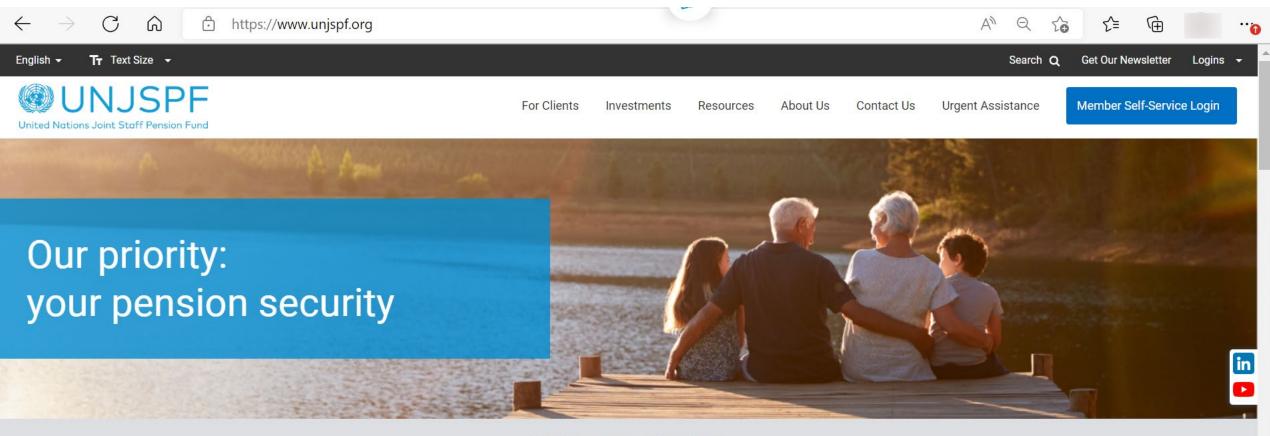


# UNJSPF WEBSITE

www.unjspf.org

# **UNJSPF** website – unjspf.org





#### What is your situation?





Separating or retiring



Retired or receiving benefits



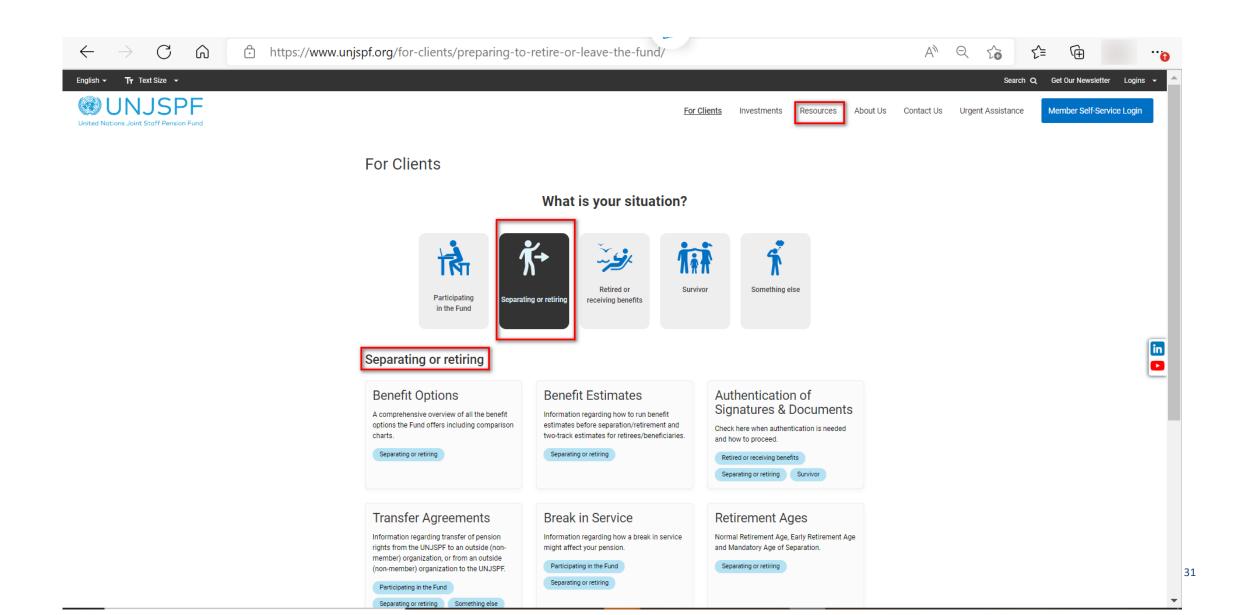
Survivor



Something else

## **UNJSPF** website - Information for Separating or Retiring





# **UNJSPF** website: Links for learning





# UNJSPF For Clients

Investments

Resources

About Us Contact Us

**Urgent Assistance** 

Member Self-Service

Watch our educational resources. Over 20 educational videos and 11 pension e-learning modules are available

Regulations, Rules and Pension Adjustment System

About Member Self-Service (MSS)

Reports, publications and policies

**Forms** 

**UNJSPF** Pension eLearning Modules

Pension Townhall Sessions

All Videos

All Booklets

Exchange Rates, CPI Adjustments, and Cost of Living Differential Factors

Case Dinest of the Fund

Watch the videos here

#### The UNJSPF Educational Videos



### Access all videos on YouTube:

https://www.youtube.com/chann el/UCIYus2IXTS2fV-wnDjOnbaQ

> All videos are available in **English, French, and Spanish**

# Or access all videos on the **UNJSPF** website:

https://www.unjspf.org/resources /all-videos/



































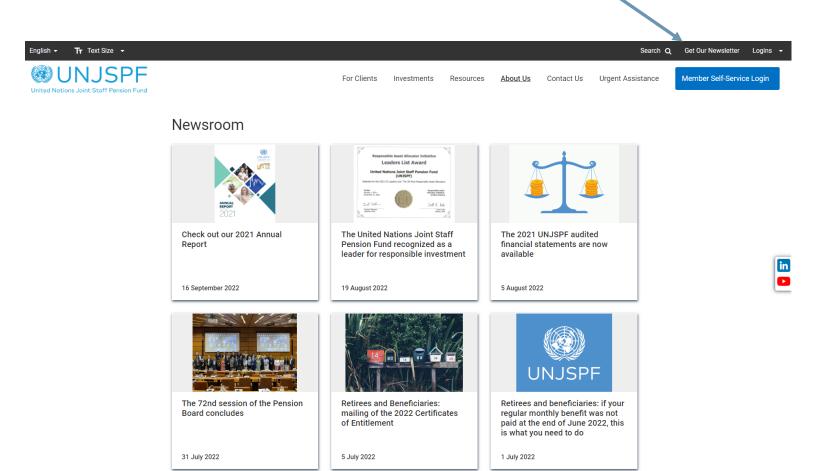


#### **Newsletters and articles**



The Fund regularly publishes articles and newsletters to provide its members with current and relevant updates: <a href="https://www.unjspf.org/about-us/newsroom/">https://www.unjspf.org/about-us/newsroom/</a>

Sign up to receive the newsletter on our website (top right corner)

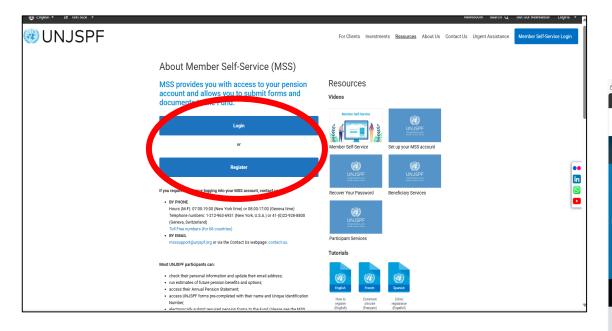


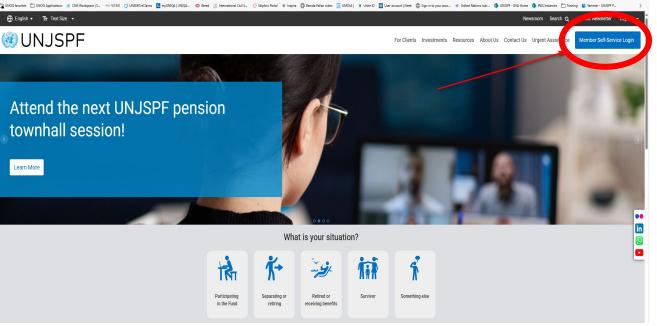
UNJSPF Member Self-Service (MSS)

## **UNJSPF Member Self-Service (MSS): How to access MSS**



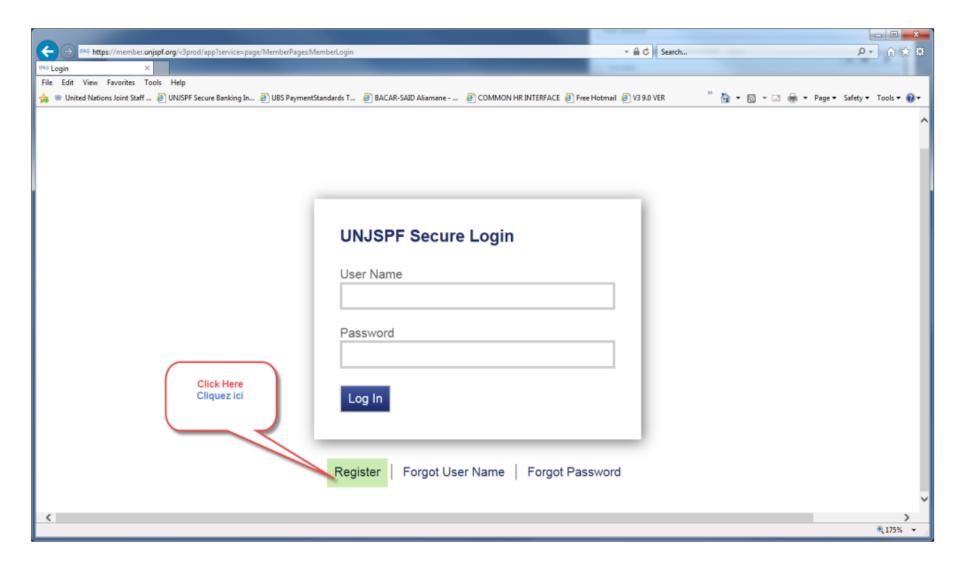








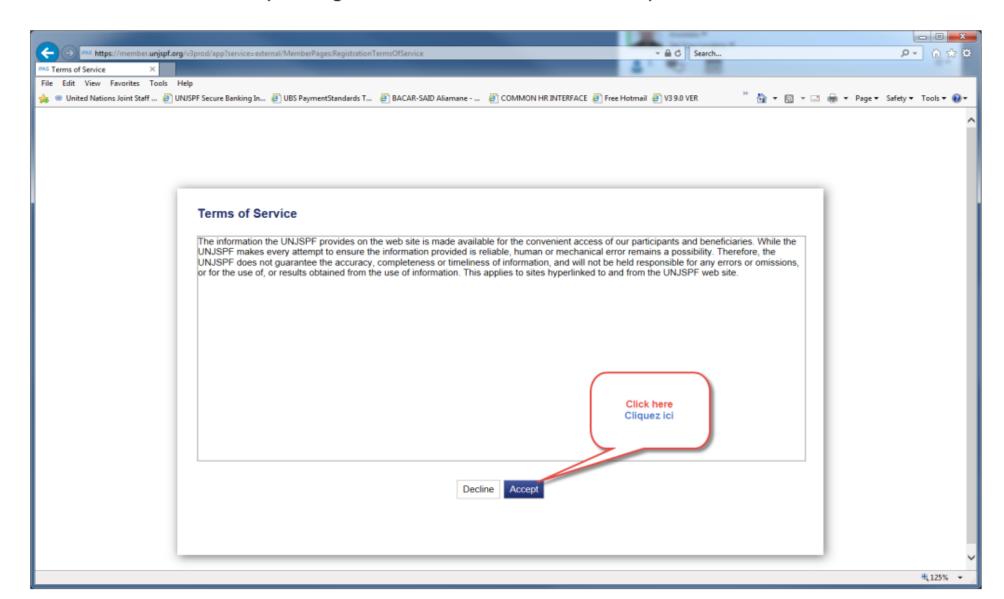
You will see the screen below



Click on the Register Button,

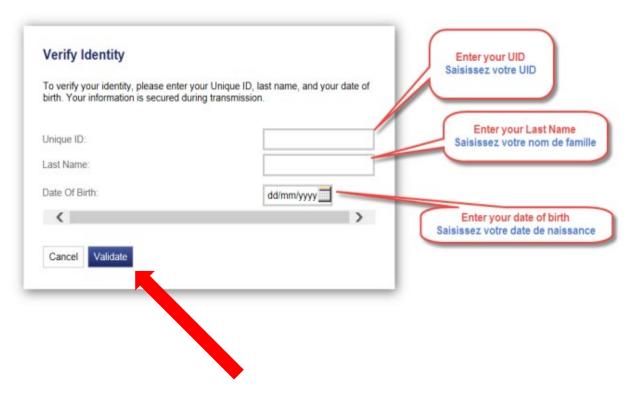


you will get the screen below. Click on the Accept Button





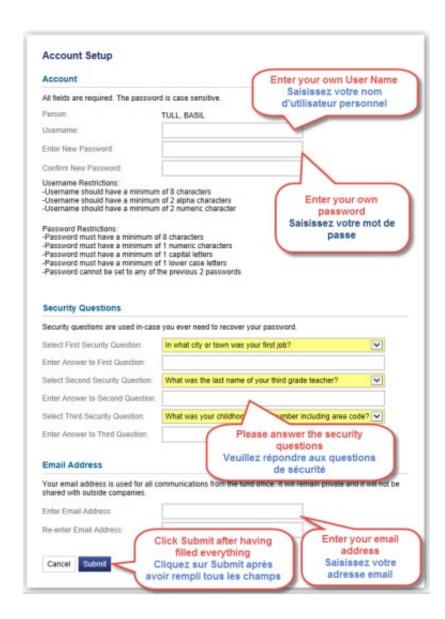
## You will reach this following screen



Please fill the requested information and click on the Validate Button

- You will need your nine-digit UNJSPF Unique Identification Number (UID), your surname and date of birth as reported to and recorded in the Fund's records, and an email address to get started.
- request it at: <a href="mailto:requestuidonly@unjspf.org">request it at: requestuidonly@unjspf.org</a>. using your UN email
- -For technical issues with MSS, write to: msssupport@unjspf.org
- For MSS: It is recommended to use a personal email address registration.

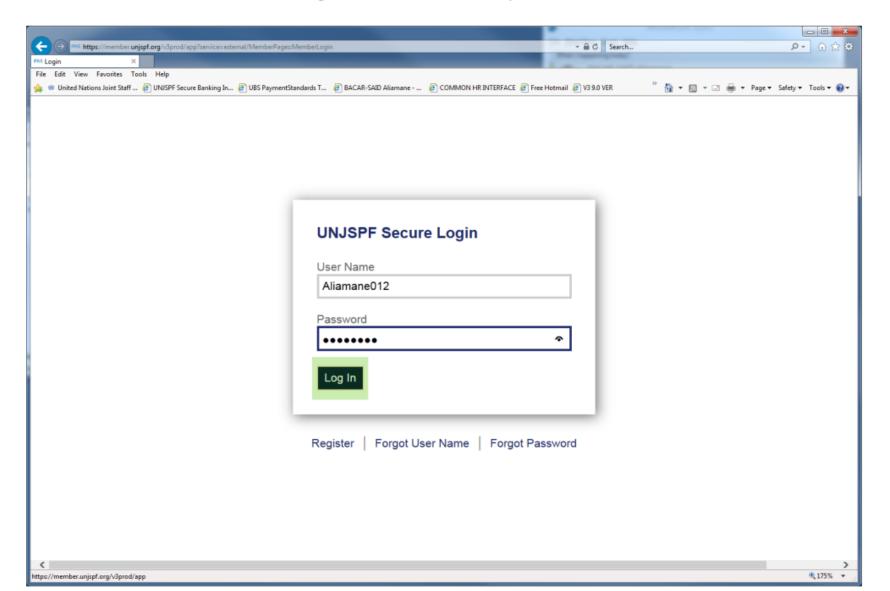




 On this screen, you will need to complete each field appropriately and click the "Submit" button.



If all is well, the system will create your account and will come back to the initial screen. Please enter your User Name and Password and Click on the "Login" button to access the system.



## **UNJSPF Member Self-Service (MSS)**





Last Logon 16/09/2025 | Account | Logout | Return To LOS

Welcome

17/09/2025

#### Menu

#### Home

Disbursements

Documents

View Existing Documents Ad-hoc Document Request

E-Forms

**Proof Documents** 

Validation Request (Article 23)

Personal Information Dependents

Restoration (Article 24) Transfer-In Request (Article 13)

Estimate

MSS Document Upload

Help

#### Home

Pour mettre à jour vos préférences linguistiques pour l'Espace client de la CCPPNU (MSS), veuillez aller à l'onglet "COMPTE" situé dans le coin supérieur droit de cette page, puis, sélectionnez l'onglet correspondant. Votre préférence linguistique définit la langue dans laquelle vous souhaitez utiliser MSS et la langue dans laquelle tous les documents concernant votre dossier seront générés par la Caisse à l'avenir. Vos options de langue sont soit l'anglais, soit le français. Une fois que vous avez opté pour une nouvelle langue, les NOUVEAUX documents générés pour votre dossier seront dans la nouvelle langue à compter de la date de changement ; les documents qui étaient déjà dans votre dossier avant un changement de langue ne seront PAS traduits dans la nouvelle langue de votre choix.

To update your language preference for your UNJSPF Member Self-Service (MSS), go to the "ACCOUNT" tab at the top right of this page and select the according tab to change your language preference. Your language preference defines the language in which you will use MSS and the language in which all documents for your case will be generated by the Fund going forward. Your language options are either English, or French. Once you have opted for a new language, NEW documents generated for your case as of that date will be in the new language; documents that were already on file prior to a language change will NOT be translated into your new language of choice.

#### General instructions:

MSS will allow you to view and update certain information in your UNJSPF records.

The Terms of Service for use of the UNJSPF MSS portal have been updated. Please read them in full here. Your continued use of the MSS portal constitutes your agreement to follow and be bound by the updated Terms of Service.

- -To update your MSS email address or password, please go to the "Account" tab at the top right of this page; select the tab(s) of your choice to make the according change(s).
- -To correct any personal information, please follow the instructions below:

If you are an employee of CTBTO, EPPO, FAO, IAEA, ICAO, ICC, ICCROM, ICGEB, IFAD, ILO, IMO, IOM, IPU, ISA, ITU, ITLOS, OPCW, UNESCO, UNIDO, UN Tourism, WA, WHO, WIPO, WMO, contact your Staff Pension Committee (SPC) Secretary.

- If you are an employee of the UN family, contact your Executive Office or your HR Office immediately.
- If you are a retiree or a beneficiary, please contact the Fund at United Nations Joint Staff Pension Fund (unispt.org).
- For help with technical problems accessing your MSS account please contact the Fund at MSSSupport@unispLorg.
- -For more detailed information on MSS please see About Member Self-Service (MSS) UNJSPF

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## **UNJSPF Member Self-Service (MSS)**



Last Logon ( Account Logou



EPPO FAO IAEA ICGEB ICCROM ICAO ICC IFAD ILO IMO IOM IPU ISA ITU ITLOS STL UN UNESCO UNIDO WHO WIPO WMO WTO

ACCOUNT – To change your MSS password, email, and security questions

Welcome

## **Account Settings**

You can update your password, email as well as a variety of other settings that affect your user account.

#### **Reset Password**

Please remember to frequently update your password.

#### **Update Security Questions**

Your security questions are used when you forget your password.

#### Update Email Address

Your email address is our primary means of communicating with you. Please make sure that you keep it up to date.

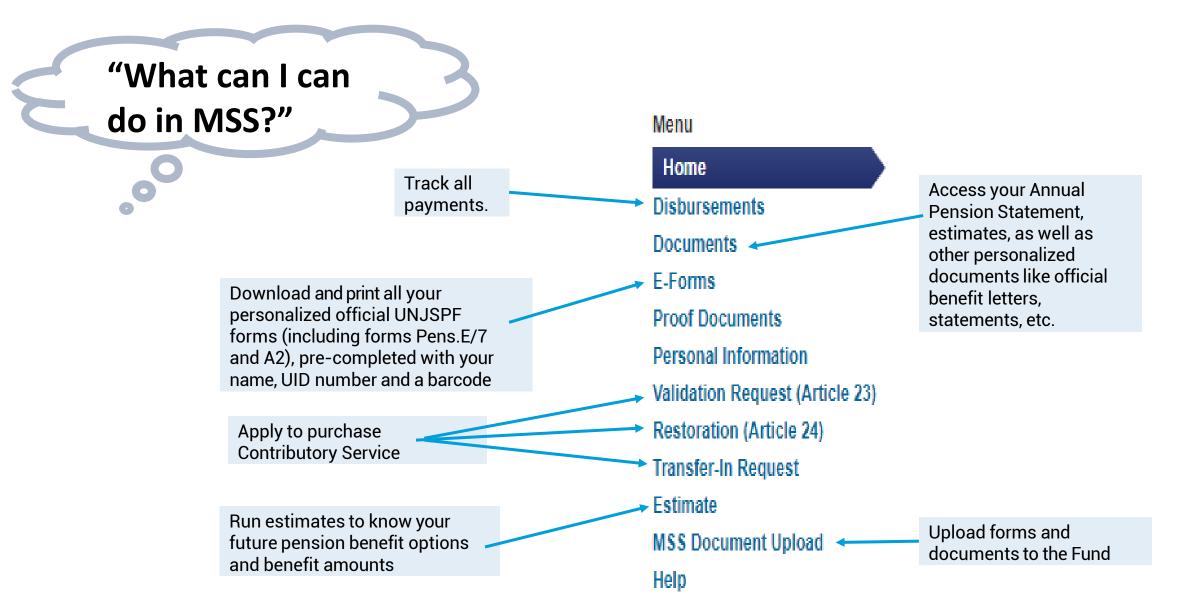
#### **Update Document Communication Preferences**

Please remember to set your document communication preferences.

Home

## **UNJSPF Member Self-Service (MSS) – Functionalities**





# ESTIMATE Run your own pension estimate from Member Self-Service (MSS)

## **Run estimates in MSS (1)**



Last Logon 09/04/2018 | Account | Logout | Return To LOE



UNJSPF EPPO FAO IAEA ICGEB ICCROM ICAO ICC IFAD ILO IMO IOM IPU ISA ITU ITLOS STL UN UNESCO UNIDO WHO WIPO WMO WTO ISA ITU ITLOS STL UN UNESCO UNIDO WHO WIPO WMO WTO

Menu

Home

Disbursements

**Documents** 

F-Forms

**Proof Documents** 

Personal Information

Validation Request (Article 23)

**Emergency Fund** 

Restoration (Article 24)

**Estimate** 

Enter your future separation date here (dd/mm/yyyy).

The field might be pre-populated with a date, however you can change that date to any future separation date of your choice.

Then hit "Submit Request" - don't leave this page until the 'wheel' has stopped turning and you are advised that your estimate can now be viewed as a PDF under the DOCUMENTS tab in MSS.

#### Disclaimer / Clause de non-responsabilité

#### Enalish

It can be useful to run an estimate of your benefit options for planning purposes or before making a final benefit election. To run your estimate, enter your proposed separation date in the designated box below. For detailed guidance on how to run and read estimates, refer to the Learning Tools page and 'Tutorials' on the Fund's website: https://www.unjspf.org/help-tutorials/. Once you have submitted your estimate request and the calculation is complete, you can view the estimate as a PDF file under the DOCUMENTS tab in MSS. Please take into consideration that the figures in the estimate are based on unaudited data available to the Fund at the time of its running, as reported to us by you or your employing organization. In most cases, it will be a good estimate as long as there are no peculiar circumstances. Bear in mind that a full audit of your pension record will be conducted at the time of your actual separation from service, in the course of processing and establishing your final pension

entitlement. If you need more advice on your est https://www.unjspf.org/contact-us/. Presently, there specific cases (e.g. cases where participants ha outside organization to the Fund, etc.); you can service/mss-known-issues-and-fag/. If your separat estimate, please contact the Fund through the o

Each time you run an estimate for a new separation date, it is recommended that you leave the 'Fixed Lump Sum Amount' box blank.

peut être utile de faire une estimation de vos o hoix final. Pour générer votre estimation, entre: es conseils détaillés sur la façon de générer et Tutoriels» sur le site Web de la Caisse: https://v 'estimation et que le calcul est terminé, l'estima lotez que les calculs de l'estimation sont basés estimation est faite et telles que rapportées à la otre dossier de pension sera effectuée au mom

This will give you an estimate with the maximum lump sum you are entitled to. Once you have the maximum, you can go back and run more estimates with smaller lump sum amounts to see how your benefits change.

établissement de votre prestation. Si vous avez besoin de plus de conseils sur yotre estimation vous pouvez contacter le ervice clientèle de la Caisse via le formulaire de contact en ligne : https://www.anjspf.org/fr/contactez-nous/. À l'heure actuelle, il xiste des «problèmes connus» concernant l'exactitude de ce calculateur d'astimation pour certain cas très précis (par xemple, pour des cas où les participants avaient des périodes de congé 🎤 pécial sans solde ou des droits de retraite ansférés d'une organisation externe à la Caisse, etc.); vous pouvez trouver une liste de tous les «problèmes connus» ici ttps://www.unjspf.org/member-self-service/mss-known-issues-and-faq/. Si la date de votre séparation de service est dans les six rochains mois et que vous avez noté un problème avec votre estin ation, vous pouvez contacter la Caisse via le formulaire contact en ligne pour obtenir de l'aide

#### ension Estimate

our Pension Ent

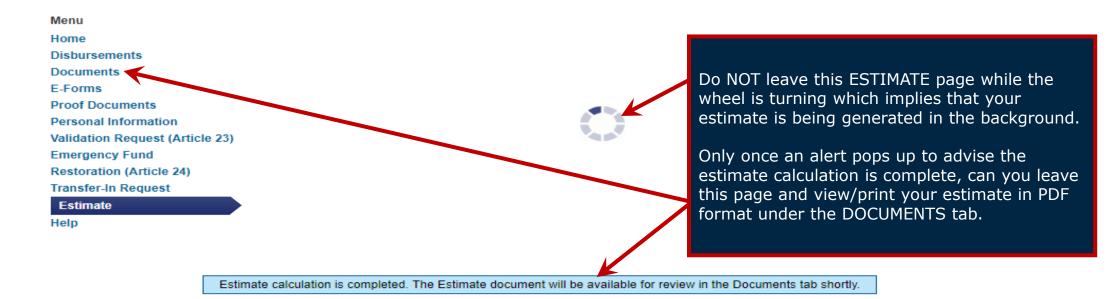
roposed Separation Date

Fixed Lump Sum Amount (In US Dollars)

Submit Request

## **Run estimates in MSS (2)**





Menu

Home

Disbursements

**Documents** 

E-Forms

**Proof Documents** 

Personal Information

Validation Request (Article 23)

**Emergency Fund** 

Restoration (Article 24)

Transfer-In Request

Estimate

Help

Disclaimer / Clause de non-responsabilité:

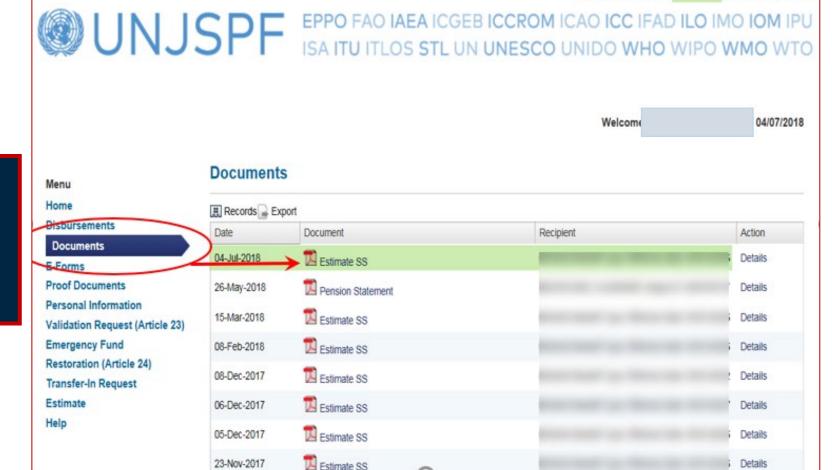
#### English

It can be useful to run an estimate of your benefit options for planning purposes or before making a final benefit election. To run your estimate, enter your proposed separation date in the designated box below. For detailed guidance on how to run and read estimates, refer to the Learning Tools page and 'Tutorials' on the Fund's website: https://www.unjspf.org/help-tutorials/. Once you have submitted your estimate request and the calculation is complete, you can view the estimate as a PDF file under the DOCUMENTS tab in MSS. Please take into consideration that the figures in the estimate are based on unaudited data, available to the Fund at the time of its running, as reported to us by you or your employing organization. In most cases, it will be a good estimate as long as there are no peculiar circumstances. Bear in mind that a full audit of your pension record will be conducted at the time of your actual separation from service, in the course of processing and establishing your final pension entitlement. If you need more advice on your estimate you may contact our Client Services via the online Contact Form: https://www.unjspf.org/contact-us/. Presently, there are some 'known issues' with the accuracy of this estimate calculator for very specific cases (e.g. cases where participants had periods of Special Leave without Pay, or transferred pension rights from an outside organization to the Fund, etc.); you can find a list of all 'known issues' here https://www.unjspf.org/member-self-service/mss-known-issues-and-faq/. If your separation date is within the next six months and you noted an issue with your estimate, please contact the Fund through the online Contact Form for assistance.

## Run estimates in MSS (3)



Last Logon 04/07/2018 | Account | Logout | Return To LO



Your estimate will appear in the 'Documents' tab once completed and remain there for viewing at any time.

## **Run estimates in MSS: Exemple**







#### NATIONS UNIES

#### UNITED NATIONS JOINT STAFF PENSION FUND CAISSE COMMUNE DES PENSIONS DU PERSONNEL DES NATIONS UNIES

NEW YORK (Headquarters)
P.O. Box 5036, UNITED NATIONS, N.Y. 10017
Tel: (212) 963 -6931; Fax: (212) 963 -3146
Email: UNJSPF@UN.ORG
Cable: UNATIONS NEWYORK
Web: http://www.unispf.org

OFFICE AT GENEVA
c/o PALAIS DES NATIONS
CH :1211, Geneva 10
Tel: +41 (0) 22 928 8800; Fax: +41 (0) 22 928 9099
E-maikUNISPE-GVA@UNISPEORG
Web: http://www.unispf.org

Ref: 000303732 PENSION NO: 409536

27 April 2018

PERSONAL AND CONFIDENTIAL

TO:

#### IPAS SELF SERVICE ESTIMATE

SUBJECT: ESTIMATE OF YOUR PENSION ENTITLEMENT

The estimate you requested is provided below. Please note that it is unaudited based on information provided by your employing Organization. An accurate determination can be made only after your separation from service has actually taken place, at which time all data will be audited. For your convenience, you may obtain information on pension issues and forms in self-service https://member.unispf.org and from our Website www.unispf.org

**Separation Date** 



Art. 30
Deferred Retirement
Benefit payable for life
as of NRA

Art. 34/35
Prospective Surviving
Spouse's Benefit
(applicable in this case)

Art. 31
Withdrawal
Settlement

## Options based on length of contributory service (CS)



Any duration of CS but younger than normal retirement age (NRA)	5 years or more of CS
	Deferred retirement benefit (Art. 30)
Withdrawal Settlement (Art. 31)	Early retirement benefit (Art. 29)
	"Normal" retirement benefit (Art. 28

## **Deferment option under Art. 32:**

Regardless of the length of your CS, you have the option to defer your benefit election/payment for up to 36 months from your separation date

(This is a choice, not a benefit!)

ESTIMATE and FORMS

How to read the estimate and complete the correct payment instruction form

## How to read estimate: separation at NRA





SUBJECT: ESTIMATE OF YOUR PENSION ENTITLEMENT



#### **NATIONS UNIES**

#### UNITED NATIONS JOINT STAFF PENSION FUND CAISSE COMMUNE DES PENSIONS DU PERSONNEL DES NATIONS UNIES

NEW YORK (Headquarters)
P.O. Box 5036, UNITED NATIONS, N.Y., N.Y. 10017
Tel: (212) 963 -6931; Fax: (212) 963 -3146
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Web: http://www.unispf.org

OFFICE AT GENEVA
c/o PALAIS DES NATIONS
CH 1211, Geneva 10
Tel: +41 (0) 22 928 8800; Fax: +41 (0) 22 928 9099
E-mail:<u>UNISPE.GYA@UNISPE.ORG</u>
Web: http://www.unjspf.org

Ref: PENSION NO:

16 October 2019

PERSONAL AND CONFIDENTIAL

TO:

#### IPAS SELF SERVICE ESTIMATE

**Separation Date** 

**Example:** 

option]

[with prospective surviving

under 2. max lump sum

spouse's benefit (Art. 34) and

accuration Data actual:

Art. 34/35
Prospective
Survivor's Benefit
(applicable in this case)

The estimate you requested is provided below. Please note that it is unaudited based on information provided by your employing Organization. An accurate determination can be made only after your separation from service has actually taken place, at which time all data will be audited. For your convenience you may obtain information on pension issues and forms in self-service https://member.unjspf.org and from our Website www.unjspf.org DOB: 06/03/1971 (Normal Retirement Age: 62) DATE OF SEPARATION 31 March 2033 RETIREMENT - ARTICLE 28 \$ 95,270.28 1. FULL PENSION . . . . . PER YEAR PROSPECTIVE SURVIVOR \$ 47,635.20 (ARTICLE 34/35). . . PER YEAR REDUCED PENSION . . . PER YEAR \$ 52,836.96 COCETHER WITH LUMP SUM (MAXIMUM) \$ 546,174.83 PROSPECTIVE SURVIVOR \$ 47,635.20 (ARTICLE 34/35), . . PER YEAR

Art. 28
Full
Retirement Benefit
payable for life,
WITHOUT
Lump Sum

Art. 28
Reduced Retirement
Benefit payable for
life together
WITH
MAX. 1/3rd
Lump Sum
(default LS amount
provided)

## How to read estimate: separation at NRA



**Example:** 

with prospective surviving spouse's benefit (Art. 34) and under 2. <u>fix</u> lump sum amount as elected by beneficiary]

**Separation Date** 

Art. 34/35
Prospective
Survivor's Benefit
(applicable in this case)



#### UNITED NATIONS JOINT STAFF PENSION FUND CAISSE COMMUNE DES PENSIONS DU PERSONNEL DES NATIONS UNIES

NEW YORK (Headquarters)
P.O. Box 5036, UNITED NATIONS, N.Y., N.Y. 10017
Tel: (212) 963 -6931; Fax: (212) 963 -3146
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Web: http://www.unisrd.org

OFFICE AT GENEVA

c/o PALAIS DES NATIONS
CH 1211, Geneva 10
Tel: +41 (0) 22 928 8800; Fax: +41 (0) 22 928 9099
E-mail:UNISPE.GVA/00LINISPE.ORG
Web: http://www.unjspf.org

PERSONAL AND CONFIDENTIAL

16 October 2019

#### IPAS SELF SERVICE ESTIMATE

SUBJECT: ESTIMATE OF YOUR PENSION ENTITLEMENT

The estimate you requested is provided below. Please note that it is unaudited based on information provided by your employing Organization. An accurate determination can be made only after your separation from service has actually taken place, at which time all data will be audited. For your convenience you may obtain information on pension issues and forms in self-service https://member.unjspf.org and from our Website www.unjspf.org

DOB: 06/03/1971 (Normal Retirement Age: 62)

DATE OF SEPARATION 31 March 2033

RETIREMENT - ARTICLE 28

1. FULL PENSION . . . . . PER YEAR \$ 95,270.28

PROSPECTIVE SURVIVOR
(ARTICLE 34/35)... PEP YEAR
\$ 47,635.20

.

2. REDUCED PENSION . . . . PER YEA

TOGETHER WITH LUMP SUM (MAXIMUM)

\$ 87,496.20

PROSPECTIVE SURVIVOR
(ARTICLE 34/35)... PER YEAR

\$ 47,635.20

You have provided the following lump sum choice for the calculation of your future benefit:

LUMP SUM %: or FIXED LUMP SUM AMOUNT: 100000.00

Art. 28
Full
Retirement Benefit
payable for life,
WITHOUT
Lump Sum

Art. 28
Reduced Retirement
Benefit payable for
life together
WITH
FIX Lump Sum of
100,000USD
(as elected by

beneficiary)

## **Payment Instruction when reaching NRA**



UNITED NATIONS JOINT STAFF PENSION

		UID Number
For participants with 5 or more years of Cont	ributory Service)	
Part I - ELECTION OF BENEFIT (Please ma	rk the applicable box below and sig	gn at the bottom of the page.)
(Surname)	(First)	(Middle)
A. RETIREMENT BENEFIT FOR PARTICIPA (Article 28) (See note 4)	V7	· · · · · · · · · · · · · · · · · · ·
Full pension	if less than one third, OR your co	ontributions with interest if
B. EARLY RETIREMENT BENEFIT FOR PA		HED AGE 55 or 58, BUT HAVE
Full early retirement pension	if less than one third, OR your co	ontributions with interest if
NOTE 1. Immediate pension at a reduced rate from the normal retirement age or at death, if $\epsilon$		enefit will commence only
C. DEFERRED RETIREMENT BENEFIT FOR RETIREMENT AGE (ARTICLE 30) (See note:		NDER THE NORMAL
Full deferred pension, with survivor s bene	efits, payable at the normal retireme	nt age
NOTE 2. Deferred benefits may be paid, at a Kindly notify the Fund approximately one monbegin.		
NOTE 3. No childs benefit is payable under a	ny form of deferred pension.	
NOTE 4. The normal retirement age is 65 for January 2014. It is age 62 for those whose pa 1990. (It is age 60 for those whose continuous	rticipation commenced or recommer	nced on or after 1 January
D. WITHDRAWAL SETTLEMENT AT ANY A	AGE UNDER THE NORMAL RETIR	REMENT AGE (Article 31)
A final cash withdrawal settlement which	will extinguish all other entitlements.	
Date:	Signature:	

ONLY Page 2 & 3 of Form Pens E/7

Full pension WITHOUT lump sum

	, hereby submit
(Surname)	(First) (Middle)
	to me as elected in Part 1 (see page 2).
	ur name to your account only. If you do not have a bank account and may be sent in care of a United Nations office. Payment cannot be be made to a third neath.
•	ctions are not completed in full, this form will be returned, causing dela
nent of benefit.)	ctions are not completed in full, this form will be returned, causing dela
1. MONTHLY BENEFIT	
remittance to my account as follows:	
NAME OF FINANCIAL INSTITUTION	DN BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICAB	(LE)
(ADDRESS)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
(122122)	code, ste. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COUN	NTRY)
T. Diana and idea and a second for	
	ur bank indicating bank codes and preferred routing for international
LUMP SUM (Complete only if differen	nt from above.)
LUMP SUM (Complete only if differer nittance to my account as follows:	
LUMP SUM (Complete only if differen	
. LUMP SUM (Complete only if differer mittance to my account as follows:	
<ol><li>LUMP SUM (Complete only if differer emittance to my account as follows:</li></ol>	DN BANK ACCOUNT NUMBER
	DN BANK ACCOUNT NUMBER
2. LUMP SUM (Complete only if different emittance to my account as follows: NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB	BANK ACCOUNT NUMBER  ILE)  Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
2. LUMP SUM (Complete only if different emittance to my account as follows: NAME OF FINANCIAL INSTITUTION	DN BANK ACCOUNT NUMBER
2. LUMP SUM (Complete only if different emittance to my account as follows: NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB	BANK ACCOUNT NUMBER  ILE)  Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
2. LUMP SUM (Complete only if different emittance to my account as follows: NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
LUMP SUM (Complete only if different mittance to my account as follows: NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB (ADDRESS)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
2. LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTION  (NAME OF BRANCH, IF APPLICAB)  (ADDRESS)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTION (NAME OF BRANCH, IF APPLICAB (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  Monthly Benefit
LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTION  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIERLY, STATE, POSTAL CO	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WTRY)  Monthly Benefit (Please Specify)
2. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF FINANCIAL INSTITUTION  (NAME OF BRANCH, IF APPLICABE  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY)  Currency of Payment: Lump Sum  (E: Benefits may be payable in any cit	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit
2. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF FINANCIAL INSTITUTE  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIES:  Currency of Payment: Lump Sum  [E: Benefits may be payable in any copayment of your benefit will be made	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WIRRY)  Monthly Benefit (Please Specify)  unrency selected by the recipient. Unless indicated otherwise, in U.S. dollars. With respect to the lump sum, if any currency other services and services are serviced by the recipient.
Currency of Payment: Lump Sum  (E: Benefits may be payable in any collars is selected, the cort	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WIRRY)  Monthly Benefit (Please Specify)  unrency selected by the recipient. Unless indicated otherwise, in U.S. dollars. With respect to the lump sum, if any currency other services and services are serviced by the recipient.
Currency of Payment: Lump Sum  (City, State, Postal code, counts as follows:  (City, State, Postal code,	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit   (Please Specify)   (Please S
2. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF FINANCIAL INSTITUTE  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY, STATE, POSTAL CODE, POSTAL COUNTY, STATE, POSTAL CODE, POSTAL COUNTY, ST	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit   (Please Specify)   (Please S
Currency of Payment: Lump Sum  (E: Benefits may be payable in any coayment of your benefit will be made than US dollars is selected, the completed in a dollars is selected, the completed in a dollars and completed in a dollar and completed	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit
2. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF FINANCIAL INSTITUTE  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIED CONTROLOGY OF Payment:  Lump Sum  [E: Benefits may be payable in any copayment of your benefit will be made	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WIRY)  Monthly Benefit  (Please Specify)  urrency selected by the recipient. Unless indicated otherwise, in U.S. dollars. With respect to the lump sum, if any currency otherwise from U.S. dollars will be done by the bank without Pensival Cases):
C. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF BRANCH, IF APPLICAB  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY, STATE, POSTAL CO	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit
C. LUMP SUM (Complete only if different emittance to my account as follows:  NAME OF BRANCH, IF APPLICAB  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTY, STATE, POSTAL CO	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WTRY)  Monthly Benefit (Please Specify)  urrency selected by the recipient. Unless indicated otherwise, in U.S. dollars. With respect to the lump sum, if any currency other version from U.S. dollars will be done by the bank without Pensional cases):  (City) (State or Province)
LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTION  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIED, COUN	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit
LUMP SUM (Complete only if different mittance to my account as follows:  NAME OF FINANCIAL INSTITUTE  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIES: Benefits may be payable in any clean US dollars is selected, the contained in any count involvement.  alling address (to be completed in a (Number and Street)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.  WTRY)  Monthly Benefit  (Please Specify)  urrency selected by the recipient. Unless indicated otherwise, in U.S. dollars. With respect to the lump sum, if any currency of version from U.S. dollars will be done by the bank without Pens all cases):  (City)  (State or Province)
LUMP SUM (Complete only if different nittance to my account as follows:  NAME OF FINANCIAL INSTITUTE  (NAME OF BRANCH, IF APPLICAB  (ADDRESS)  (CITY, STATE, POSTAL CODE, COUNTIERED STATE, POSTAL CODE, POSTAL CO	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.    Monthly Benefit

## **Payment Instruction when reaching NRA**



UNITED NATIONS JOINT STAFF PENSION FUND

		UID Number
For participants with 5 or more years of Cont	ributory Service)	
Part I - ELECTION OF BENEFIT (Please main	rk the applicable box below and sign	n at the bottom of the page.)
(Surname)	(First)	(Middle)
A. RETIREMENT BENEFIT FOR PARTICIPA (Article 28) (See note 4)	ANTS WHO HAVE REACHED THE	NORMAL RETIREMENT AGE
Full pension     One-third lump sum, OR       greater, AND the balance as a pension. T	if less than one third, OR your cor	ntributions with interest if
B. EARLY RETIREMENT BENEFIT FOR PA NOT REACHED THE NORMAL RETIREMEN		ED AGE 55 or 58, BUT HAVE
Full early retirement pension     One-third lump sum, OR \$     greater, AND the balance as an early retire.	if less than one third, OR your cor	ntributions with interest if
NOTE 1. Immediate pension at a reduced rate from the normal retirement age or at death, if e		nefit will commence only
C. DEFERRED RETIREMENT BENEFIT FOR RETIREMENT AGE (ARTICLE 30) (See notes		IDER THE NORMAL
Full deferred pension, with survivor s bene	efits, payable at the normal retiremen	it age
NOTE 2. Deferred benefits may be paid, at a Kindly notify the Fund approximately one mont begin.		
NOTE 3. No childs benefit is payable under a	ny form of deferred pension.	
NOTE 4. The normal retirement age is 65 for 1 January 2014. It is age 62 for those whose par 1990. (It is age 60 for those whose continuous	rticipation commenced or recommen	ced on or after 1 January
D. WITHDRAWAL SETTLEMENT AT ANY A	GE UNDER THE NORMAL RETIR	EMENT AGE (Article 31)
A final cash withdrawal settlement which v	will extinguish all other entitlements	
Date:	Signature:	

ONLY Page 2 & 3 of Form Pens E/7

Full pension WITH Lump sum

PA	RT II - PAYMENT INSTRU	CTIONS (PLEASE PRINT or 1	TYPE - D <u>O NOT</u> USE ABBREVI	
Ι,	(Surname)	(Fire	st) (Middle)	, hereby submit
	yment instructions for the b	enefit payable to me as electe	ed in Part 1 (see page 2).	- 6
	are unable to open one, the remitted to a mailing addre	en payment may be sent in cass, nor can it be made to a th	account only. If you do not have are of a United Nations office. F ird party. empleted in full, this form will be n	Payment cannot be
pay	yment of benefit.)  1. MONTHLY BENEFIT			
Rν	remittance to my account a	e follows:		
Dy		NCIAL INSTITUTION	BANK ACCOU	NT NUMBER
	(NAME OF BRA	NCH, IF APPLICABLE)		
			Indicate your SWIFT, ABA, Routin	g, BLZ, ABI, CAB or sorting
	(A)	ODRESS)	code, etc. as required by your ban	
	(CITY, STATE, PO:	STAL CODE, COUNTRY)		
NC	<u>OTE</u> : Please provide a docu payments.	ment from your bank indicating	g bank codes and preferred routi	ng for international
D.	2. LUMP SUM (Complete remittance to my account a	only if different from above.)		
Бу		NCIAL INSTITUTION	BANK ACCOU	NTNUMBER
	(NAME OF BRAI	ICH, IF APPLICABLE)		
	(A	ODRESS)	Indicate your SWIFT, ABA, Routin code, etc. as required by your ban	
	(CITY, STATE, PO	STAL CODE, COUNTRY)		
	Currency of Payment:	Lump Sum	Monthly Benefit	
В.	Currency of Fayinent.	Lump oum	monthly benefit	
		(Please Specify)		se Specify)
<u>NC</u>	payment of your benefit	able in any currency selected will be made in U.S. dollars.	d by the recipient. Unless indi- With respect to the lump sum S. dollars will be done by the	cated otherwise, , if any currency other
	payment of your benefit than US dollars is selec	able in any currency selecte will be made in U.S. dollars. ted, the conversion from U.	d by the recipient. Unless indi With respect to the lump sum	cated otherwise, , if any currency other
	payment of your benefit than US dollars is selec Fund involvement.	able in any currency selecte will be made in U.S. dollars. ted, the conversion from U. completed in all cases):	d by the recipient. Unless indi With respect to the lump sum	cated otherwise, , if any currency other
_	payment of your benefit than US dollars is select Fund involvement. Mailing address (to be co	able in any currency selecter will be made in U.S. dollars. ted, the conversion from U. completed in all cases):	d by the recipient. Unless indi With respect to the lump sum S. dollars will be done by the	cated otherwise, , if any currency other bank without Pension
_	payment of your benefit than US dollars is select Fund involvement. Mailing address (to be co	able in any currency selecter will be made in U.S. dollars. ted, the conversion from U. completed in all cases):	d by the recipient. Unless indi With respect to the lump sum S. dollars will be done by the	cated otherwise, , if any currency other bank without Pension  (State or Province)
_	payment of your benefit than US dollars is select Fund involvement. Mailing address (to be co (Number and S	able in any currency selecter will be made in U.S. dollars. ted, the conversion from U. completed in all cases):	d by the recipient. Unless indi. With respect to the lump sum. S. dollars will be done by the  (City)  Zip or Postal code)	cated otherwise, , if any currency other bank without Pension  (State or Province)

2

## How to read estimate: separation between ERA and NRA

UNITED NATIONS



**Example:** with prospective surviving spouse's benefit (Art. 34)

NATIONS UNIES

UNITED NATIONS JOINT STAFF PENSION FUND CAISSE COMMUNE DES PENSIONS DU PERSONNEL DES NATIONS UNIES

NEW YORK (Headquarters) P.O. Bax 5036, UNITED NATIONS, N.Y., N.Y. 10017 Tel: (212) 963 -6931; Fax: (212) 963 -3146 Email: UNJSPE@UN.ORG Cable: UNATIONS NEWYORK

PERSONAL AND CONFIDENTIAL

OFFICE AT GENEVA c/o PALAIS DES NATIONS CH 4211, Geneva 10 Tel: +41 (0) 22 928 8800; Fax: +41 (0) 22 928 9099

PENSION NO:

26 April 2018

TO:

IPAS SELF SERVICE ESTIMATE

SUBJECT: ESTIMATE OF YOUR PENSION ENTITLEMENT

The estimate you requested is provided below. Please note that if unaudited based on information provided by your employing Organization An accurate determination can be made only after your separation from se vice has actually taken place, at which time all data will be audited. For your convenience, you may obtain information on pension issues and forms in self-service https://member.unjspf.org and from our Website www.unjspf.org

**Separation Date** 

DOB: 06/03/1971 (Normal Retirement Age: 62)

DATE OF SEPARATION

31 March 2026

EARLY RETIREMENT - ARTICLE 29

1. FULL PENSION . . . . . PER YEAR \$ 38,345.64 PROSPECTIVE SURVIVOR \$ 19,172.88 (ARTICLE 34/35). . . PER YEAR

OR

2. REDUCED PENSION \$ 14,628.96 TOGETHER WITH LUMP SUM (MAXIMUM) \$ 330,944.19 PROSPECTIVE SURVIVOR

(ARTICLE 34/35)

\$ 19,172.88

FULL DEFERRED RETIREMENT - ARTICLE 30

\$ 65,548.20

Art. 34/35 **Prospective Surviving Spouse's** Benefit (applicable in this case)

> PROSPECTIVE SURVIVOR \$ 32,774.16

(ARTICLE 34/35). . . PER YEAR

WITHDRAWAL SETTLEMENT - ARTICLE 31

\$ 661,888.38

Art. 29 Full **Early Retirement** Benefit payable for life, WITHOUT **Lump Sum** 

Art. 29 Reduced **Early Retirement** Benefit payable for life, together MAX. Lump Sum

Art. 30 **Deferred Retirement Benefit payable for** life as of NRA

> Art. 31 Withdrawal Settlement

## **Payment Instruction when opting for Early retirement**





UNITED NATIONS JOINT STAFF PENSION FUND

			UID Number	
(For parti	cipants with 5 or more year	rs of Contributory Service)		
Part I	ELECTION OF BENEFIT (	Please mark the applicable box below and sign	n at the bottom of the page.)	
	,		1 0 7	
	(5	(500)	25148.)	
	(Surname)	(First)	(Middle)	
	7IREMENT BENEFIT FOR I 28) (See note 4)	PARTICIPANTS WHO HAVE REACHED THE	NORMAL RETIREMENT AGE	
	e-third lump sum, OR \$ eater, AND the balance as a	if less than one third, OR your cor pension. This means renouncing all rights to a	minimum pension	
		IT FOR PARTICIPANTS WHO HAVE REACH ETIREMENT AGE (Article 29) (See note 4)	ED AGE 55 or 58, BUT HAVE	
1. Fu	Il early retirement pension			
<ol><li>On</li></ol>	e-third lump sum, OR \$	if less than one third, OR your con	ntributions with interest if	,
NOTE	Immediate pension at a re	educed rate, with survivor, s benefits. Child's ber		
from th	e normal retirement age or a	t death, if earlier.		
	FERRED RETIREMENT BEI EMENT AGE (ARTICLE 30)	NEFIT FOR PARTICIPANTS AT ANY AGE UN (See notes 2, 3 and 4)	IDER THE NORMAL	
Fu	ll deferred pension, with surv	vivor s benefits, payable at the normal retiremen	nt age	
		paid, at a reduced rate, on or after age 55 or yone month prior to the age at which you wish		
	<ol><li>No childs benefit is payab</li></ol>	ole under any form of deferred pension.		
Januar	y 2014. It is age 62 for those	e is 65 for those whose participation commence whose participation commenced or recommen continuous participation had commenced befor	nced on or after 1 January	
D. WIT	HDRAWAL SETTLEMENT	AT ANY AGE UNDER THE NORMAL RETIR	EMENT AGE (Article 31)	
A f	inal cash withdrawal settleme	ent which will extinguish all other entitlements		
Deri		Cianatura		
Date:		Signature:		

ONLY Page 2 & 3 of Form Pens E/7

Early retirement pension WITHOUT lump sum

ART II - PAYMENT INSTRUCTIONS (PLE		IOT TISE ARRDEVIATIONS
	LASE PRINT OF THE - DON	, hereby submit
(Surname)	(First)	(Middle)
yment instructions for the benefit payable	e to me as elected in Part 1 (	see page 2).
OTE Payment will have to be made in yo	our name to your account only	. If you do not have a bank account and
are unable to open one, then payment		ed Nations office. Payment cannot be
remitted to a mailing address, nor can it		
	uctions are not completed in for	ull, this form will be returned, causing delay i
yment of benefit.)		
MONTHLY BENEFIT		
remittance to my account as follows:	OH.	BANK ACCOUNT NUMBER
NAME OF FINANCIAL INSTITUTION	ON	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICAR	SLE)	
(ADDRESS)		te your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting etc. as required by your bank for direct deposit.
(NOUNEOU)	code, e	no. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COU	NTRY)	
OTE: Please provide a document from yo	our hank indicating hank code	s and preferred routing for international
payments.	ar barn marcaling barn occor	and preferred reading for international
2. LUMP SUM (Complete only if differen	ent from obour 1	
remittance to my account as follows:	III II OIII above.)	
NAME OF FINANCIAL INSTITUTION	ON	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICAE		
(NAME OF BRANCH, IF APPLICAE	BLE)	
	Indicat	your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
(ADDRESS)	code, c	etc. as required by your bank for direct deposit.
(CITY STATE POSTAL CODE COLL	NTRY	
(CITY, STATE, POSTAL CODE, COU	INTRY)	
(CITY, STATE, POSTAL CODE, COU	NTRY)	
		onthly Danofit
	Mo	nthly Benefit
Currency of Payment: Lump Sum	(Please Specify)	(Please Specify)
. Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c	(Please Specify)	(Please Specify) ipient. Unless indicated otherwise,
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made	(Please Specify) currency selected by the rece in U.S. dollars. With respe	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made	(Please Specify) currency selected by the rece in U.S. dollars. With respe	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other
Currency of Payment: Lump Sum OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.	(Please Specify) currency selected by the rece e in U.S. dollars w inversion from U.S. dollars w	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con	(Please Specify) currency selected by the rece e in U.S. dollars w inversion from U.S. dollars w	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.	(Please Specify) currency selected by the rece e in U.S. dollars w inversion from U.S. dollars w	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in	(City)  Mo  (Please Specify)  currency selected by the rece e in U.S. dollars. With respenyersion from U.S. dollars we all cases):	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)
OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in a selected in a s	(Please Specify) currency selected by the rece in U.S. dollars. With responsersion from U.S. dollars was all cases):	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in a	(City)  Mo  (Please Specify)  currency selected by the rece e in U.S. dollars. With respenyersion from U.S. dollars we all cases):	(Please Specify) ipient. Unless indicated otherwise, ict to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in	(City)  Mo  (Please Specify)  currency selected by the rece e in U.S. dollars. With respenyersion from U.S. dollars we all cases):	(Please Specify) ipient. Unless indicated otherwise, act to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in a (Number and Street)	(Please Specify)  currency selected by the rece in U.S. dollars. With respensersion from U.S. dollars was all cases):  (City)	(Please Specify) ipient. Unless indicated otherwise, ict to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)
Currency of Payment: Lump Sum  OTE: Benefits may be payable in any c payment of your benefit will be made than US dollars is selected, the con Fund involvement.  Mailing address (to be completed in a	(City)  Mo  (Please Specify)  currency selected by the rece e in U.S. dollars. With respenyersion from U.S. dollars we all cases):	(Please Specify) ipient. Unless indicated otherwise, ict to the lump sum, if any currency other vill be done by the bank without Pension  (State or Province)

## **Payment Instruction when opting for Early retirement**



PENS.E/7(4-01)



UNITED NATIONS JOINT STAFF PENSION

					UID Nu	ımber	
oa	articipants with 5 or more years of	f Contributory Service)					
r	I - ELECTION OF BENEFIT (Plea	se mark the applicable box below and	sign at th	ne bott	om of the	e page.	)
						,-5-	,
	(Surname)	(First)			(Mi	ddle)	
	(ourier)	(* 1131)			(	duicy	
-	RETIREMENT BENEFIT FOR PAR icle 28) (See note 4)	TICIPANTS WHO HAVE REACHED	THE NO	RMAL	RETIRE	MENT	AGE
	Full pension						
		if less than one third, OR you sion. This means renouncing all rights					
	,						
		OR PARTICIPANTS WHO HAVE REA		GE 55	or 58, E	BUT HA	VE
		EMENT AGE (Article 29) (See note 4)					
		if less than one third, OR you					
	greater, AND the balance as an ear	rly retirement benefit					
0	TE 1. Immediate pension at a reduc	and and a could accomplished the Children				_	
	the normal retirement age or at dea		s benefit w	ıll com	mence o	nly	
n	n the normal retirement age or at dea	ath, if earlier.				•	
n	n the normal retirement age or at dea	ath, if earlier.				•	
ı	n the normal retirement age or at dea DEFERRED RETIREMENT BENEF FIREMENT AGE (ARTICLE 30) (Sec	ath, if earlier.	UNDER	THE	NORMAL		
וו בו	n the normal retirement age or at dea DEFERRED RETIREMENT BENEF FIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be pair	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 58	E UNDER ement age	THE I	NORMAL		
n o	DEFERRED RETIREMENT BENEF TREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be paidly notify the Fund approximately on in.	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGI e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 58 e month prior to the age at which you we	E UNDER ement age	THE I	NORMAL		
on on on on on on on on on on on on on o	DEFERRED RETIREMENT BENEF TIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be pai tily notify the Fund approximately on in. TE 3. No childs benefit is payable u	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 50 e month prior to the age at which you will nder any form of deferred pension.	ement age 5 or 58 as vish your 0	the ca	se may bed benefit	e.	
o o o	DEFERRED RETIREMENT BENEF TREMENT AGE (ARTICLE 30) (Set Full deferred pension, with survivor. TE 2. Deferred benefits may be pai tly notify the Fund approximately on in. TE 3. No childs benefit is payable u TE 4. The normal retirement age is uary 2014. It is age 62 for those who	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGI e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 58 e month prior to the age at which you we	E UNDER  ment age  5 or 58 as  vish your o	the ca	se may be denefit	e. to	pl
n ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	DEFERRED RETIREMENT BENEFIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor.  TE 2. Deferred benefits may be paidly notify the Fund approximately on in.  TE 3. No childs benefit is payable used in the part of the part of the payable of the payab	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) Is benefits, payable at the normal retire d, at a reduced rate, on or after age 50 e month prior to the age at which you wander any form of deferred pension.  65 for those whose participation commences participation commenced or recommenced or recommenced.	ement age or 58 as vish your or remenced or remenced coefore 199	the ca deferre	se may bed benefit the service of th	ee. to  or afte	er 1
on one	DEFERRED RETIREMENT BENEF TIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be pail tily notify the Fund approximately on in. TE 3. No childs benefit is payable u TE 4. The normal retirement age is uary 2014. It is age 62 for those who 0. (It is age 60 for those whose cont WITHDRAWAL SETTLEMENT AT A	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 50 e month prior to the age at which you we nder any form of deferred pension. 65 for those whose participation commenced or recom- tinuous participation had commenced by ANY AGE UNDER THE NORMAL RE	ement age for 58 as vish your of menced or remenced or menced or m	the ca deferre	se may be denefit the nenced or fiter 1 Jan	e. to n or aftenuary	er 1
n	DEFERRED RETIREMENT BENEF TIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be pail tily notify the Fund approximately on in. TE 3. No childs benefit is payable u TE 4. The normal retirement age is uary 2014. It is age 62 for those who 0. (It is age 60 for those whose cont WITHDRAWAL SETTLEMENT AT A	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 53 e month prior to the age at which you wander any form of deferred pension. 65 for those whose participation commense participation commenced or recommituous participation had commenced by	ement age for 58 as vish your of menced or remenced or menced or m	the ca deferre	se may be denefit the nenced or fiter 1 Jan	e. to n or aftenuary	er 1
on one	DEFERRED RETIREMENT BENEF TIREMENT AGE (ARTICLE 30) (See Full deferred pension, with survivor. TE 2. Deferred benefits may be pail tily notify the Fund approximately on in. TE 3. No childs benefit is payable u TE 4. The normal retirement age is uary 2014. It is age 62 for those who 0. (It is age 60 for those whose cont WITHDRAWAL SETTLEMENT AT A	ath, if earlier.  IT FOR PARTICIPANTS AT ANY AGE e notes 2, 3 and 4) s benefits, payable at the normal retire d, at a reduced rate, on or after age 50 e month prior to the age at which you we nder any form of deferred pension. 65 for those whose participation commenced or recom- tinuous participation had commenced by ANY AGE UNDER THE NORMAL RE	ement age for 58 as vish your of menced or remenced or menced or m	the ca deferre	se may be denefit the nenced or fiter 1 Jan	e. to n or aftenuary	er 1

ONLY Page 2 & 3 of Form Pens E/7

Early
Retirement
pension
WITH lump
sum

PART II - PAYMENT INSTRUCTIONS (PLEASE PRINT or TY	
(Surname) (First)	(Middle) , hereby submit
ayment instructions for the benefit payable to me as elected	
NOTE Payment will have to be made in your name to your ac	, , , ,
are unable to open one, then payment may be sent in car	
remitted to a mailing address, nor can it be made to a third	
A. Payment Instructions (If payment instructions are not com	pleted in full, this form will be returned, causing delay in
ayment of benefit.)	
1. MONTHLY BENEFIT	
By remittance to my account as follows:	
NAME OF FINANCIAL INSTITUTION	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICABLE)	
	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
(ADDRESS)	code, etc. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COUNTRY)	
NOTE DI	
NOTE: Please provide a document from your bank indicating I payments.	bank codes and preferred routing for international
2. LUMP SUM (Complete only if different from above.)	
By remittance to my account as follows:	BANK ACCOUNT NUMBER
HAME OF FINANCIAL MOTTORION	DAIN ADDOM HOMBEN
(NAME OF BRANCH, IF APPLICABLE)	
	Indicate view CARET, ADA, Develop DLT, ADL CAR or continu
(ADDRESS)	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting code, etc. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COUNTRY)	
B. Currency of Payment: Lump Sum	Monthly Benefit
(Please Specify)	(Please Specify)
NOTE: Benefits may be payable in any currency selected	
payment of your benefit will be made in U.S. dollars. I than US dollars is selected, the conversion from U.S.	
Fund involvement.	. donars will be done by the bank without Pension
C. Mailing address (to be completed in all cases):	
. maining address (to be completed in an cases).	
(Number and Street)	(City) (State or Province)
(Zip	or Postal code) (Country)
(Personal Email Address)	(Best phone number (Home or Cell)
Date: Sign	nature:

## How to read estimate: separation before ERA



**Example** [with prospective surviving spouse's benefit (Art. 34)]

**UNITED NATIONS** 



NATIONS UNIES

UNITED NATIONS JOINT STAFF PENSION FUND CAISSE COMMUNE DES PENSIONS DU PERSONNEL DES NATIONS UNIES

NEW YORK (Headquarters) P.O. Box 5036, UNITED NATIONS, N.Y., N.Y. 10017 Tel: (212) 963 -6931; Fax: (212) 963 -3146 Email: UNJSPF@UN.ORG Cable: UNATIONS NEWYORK Web: http://www.unjspf.org

OFFICE AT GENEVA c/o PALAIS DES NATIONS CH -1211, Geneva 10 Tel: +41 (0) 22 928 8800; Fax: +41 (0) 22 928 9099 E-mail:UNJSPEGVA@UNJSPEORG Web: http://www.unjspf.org

Ref: 000303732 PENSION NO: 409536

27 April 2018

PERSONAL AND CONFIDENTIAL

T0:

#### IPAS SELF SERVICE ESTIMATE

SUBJECT: ESTIMATE OF YOUR PENSION ENTITLEMENT

The estimate you requested is provided below. Please note that it is unaudited based on information provided by your employing Organization. An accurate determination can be made only after your separation from service has actually taken place, at which time all data will be audited. For your convenience, you may obtain information on pension issues and forms in self-service https://member.unispf.org and from our Website www.unispf.org

**Separation Date** 

DOB: 06/03/1971 (Normal Retirement Age: 62) DATE OF SEPARATION

30 June 2018

FULL DEFERRED RETIREMENT - ARTICLE 30 AT AGE 62 . . . . . . . . PER YEAR

\$ 17,418.60

PROSPECTIVE SURVIVOR (ARTICLE 34/35). . . PER YEAR Spouse's Benefit

WITHDRAWAL SETTLEMENT - ARTICLE 31

\$ 258,017.24

\$ 34,837.08

Art. 31 Withdrawal Settlement

**Deferred Retirement** Benefit payable for life as of NRA

Art. 30

Art. 34/35 **Prospective Surviving** (applicable in this case)

## Payment Instruction when opting for Deferred retirement



#### 

#### UNITED NATIONS JOINT STAFF PENSION FUND INSTRUCTIONS FOR PAYMENT OF BENEFITS

UID Number				

As a participant in the Pension Fund you will, upon separation, become entitled to one of the benefits indicated on page 2. To assist you in filling out this form, you should read the instructions below since all parts of the form do not necessarily apply to your situation

If you believe you are entitled to a disability benefit you should not complete this form, but should refer to Article 33 and relevant Administrative Rules H

- If you wish to elect deferment of payment or choice of benefit (under the terms of Article 32 of the Regulations), the ONLY action
  required by you is to enter your mailing address and sign the statement below. Please note the important provision of Article 32,
  which applies if you defer election, but make no final choice within 36 months. However, in accordance with Article 44 the Fund
  shall not be liable for interest on any due but unpaid benefits.
- 2. If you wish to submit payment instructions at this time, please complete this form as follows:
  - a) You should complete Parts I and II, and sign the form on pages 2 and 3.

(For participants with 5 or more years of Contributory Service)

b) If you have less than 5 years of contributory service, you should NOT complete this form, but should get in touch with the Secretary of your Staff Pension Committee.

(Please read carefully the notes which are intended as a guide to the benefit to which you may be entitled.)

- 3. Completed form should be sent to the Secretary of your Staff Pension Committee.
- Additional points to be noted:
  - a) A participant is not deemed to have reached the age of 55, 58, 60, 62 or 65 until the end of the day of his/her 55n, 58n, 60n, 62nd or 65m birthday, respectively.
  - b) Entitlement to a benefit does not exist until a participant separates from service.
  - No benefit can be paid until documentation is processed and payment is certified by the Chief Executive of the Pension Fund.
  - Monthly pension benefits may be subject to cost-of-living adjustments.
- Articles 34, 35, 35 bis, 36 and 37 of the Regulations automatically provide for certain benefits in respect of eligible widows, widowers, divorced surviving spouses, children or secondary dependants.
- 6. Full commutation into a lump sum may be possible where the amount of a periodic benefit would be below US\$1000 per year.
- You should have on file a "Designation of Recipient of Residual Settlement form. Any desired change in such designations should does submitted on form PENS.A/2.
- 8. Please refer to Article 46 of the Regulations regarding forfeiture of benefits

NOTE: The following portion is to be completed ONLY if you elect deferment of payment under Article 32 of the Regulations, please note that your account accrues interests only until your separation date. If y elect to such deferment, please return this page to the Secretary of your Staff Pension Committee of RETAIN pages 2 and 3, to be used when notifying your final decision.				
I, (Print Name) period of up to 36 months from the date of my My future mailing address is:		ayment or choice of benefit for a cle 32 of the Regulations.		
(Number and Street)	(City) (Zip or Postal code)	(State or Province)		

ONLY Page 1 & 2 of Form Pens E/7





UNITED NATIONS JOINT STAFF PENSION FUND

Part I - ELECTION OF BENEFIT (Please mark the applicable box below and sign at the bottom of the page.)  (Surname) (First) (Middle)  A. RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED THE NORMAL RETIREMENT AGE (Article 28) (See note 4)  1. Full pension  2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as a pension. This means renouncing all rights to a minimum pension  B. EARLY RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED AGE 55 or 58, BUT HAVE NOT REACHED THE NORMAL RETIREMENT AGE (Article 29) (See note 4)  1. Full early retirement pension							
(Surname) (First) (Middle)  A. RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED THE NORMAL RETIREMENT AGE (Article 28) (See note 4)  1. Full pension.  2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as a pension. This means renouncing all rights to a minimum pension  B. EARLY RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED AGE 55 or 58, BUT HAVE NOT REACHED THE NORMAL RETIREMENT AGE (Article 29) (See note 4)  1. Full early retirement pension 2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as an early retirement benefit.							
A. RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED THE NORMAL RETIREMENT AGE (Article 28) (See note 4)  1. Full pension	Part I - ELECTION OF BENEFIT (Please mark the applicable box below and sign at the bottom of the page.)						
A. RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED THE NORMAL RETIREMENT AGE (Article 28) (See note 4)  1. Full pension							
(Article 28) (See note 4)  1. Full pension  2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as a pension. This means renouncing all rights to a minimum pension  B. EARLY RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED AGE 55 or 58, BUT HAVE NOT REACHED THE NORMAL RETIREMENT AGE (Article 29) (See note 4)  1. Full early retirement pension  2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as an early retirement benefit.							
2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as a pension. This means renouncing all rights to a minimum pension  B. EARLY RETIREMENT BENEFIT FOR PARTICIPANTS WHO HAVE REACHED AGE 55 or 58, BUT HAVE NOT REACHED THE NORMAL RETIREMENT AGE (Article 29) (See note 4)  1. Full early retirement pension  2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as an early retirement benefit.							
NOT REACHED THE NORMAL RETIREMENT AGE (Article 29) (See note 4)  1. Full early retirement pension 2. One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as an early retirement benefit.							
One-third lump sum, OR \$ if less than one third, OR your contributions with interest if greater, AND the balance as an early retirement benefit							
NOTE 1. Immediate pension at a reduced rate, with survivor,s benefits. Child's benefit will commence only							
from the normal retirement age or at death, if earlier.							
C. DEFERRED RETIREMENT BENEFIT FOR PARTICIPANTS AT ANY AGE UNDER THE NORMAL RETIREMENT AGE (ARTICLE 30) (See notes 2, 3 and 4)							
Full deferred pension, with survivor s benefits, payable at the normal retirement age	\$						
NOTE 2. Deferred benefits may be paid, at a reduced rate, on or after age 55 or 58 as the case may be. Kindly notify the Fund approximately one month prior to the age at which you wish your deferred benefit to begin.							
NOTE 3. No childs benefit is payable under any form of deferred pension.							
NOTE 4. The normal retirement age is 65 for those whose participation commenced or recommenced on or after 1 January 2014. It is age 62 for those whose participation commenced or recommenced on or after 1 January 1990. (It is age 60 for those whose continuous participation had commenced before 1990.)							
D. WITHDRAWAL SETTLEMENT AT ANY AGE UNDER THE NORMAL RETIREMENT AGE (Article 31)							
A final cash withdrawal settlement which will extinguish all other entitlements							
Date: Signature:							

PENS.E/7(4-01)

(Best phone number (Home or Cell)

## Payment Instruction when opting for withdrawal settlement





	UNITED NATIONS JOINT STAFF PENSION FUND	
or participants with 5 or more year	ars of Contributory Service)	UID-Number
Part I - ELECTION OF BENEFIT	(Please mark the applicable box below and	d sign at the bottom of the page.)
	16.0	
(Surname)	(First)	(Middle)
A. RETIREMENT BENEFIT FOR (Article 28) (See note 4)	PARTICIPANTS WHO HAVE REACHED	THE NORMAL RETIREMENT AGE
<ol><li>One-third lump sum, OR \$</li></ol>	if less than one third, OR you spension. This means renouncing all rights	ur contributions with interest if
g	, parada i i i i i i i i i i i i i i i i i i	
	FIT FOR PARTICIPANTS WHO HAVE RE RETIREMENT AGE (Article 29) (See note 4)	
2. One-third lump sum, OR _\$	if less than one third, OR you an early retirement benefit	ur contributions with interest if
NOTE 1. Immediate pension at a from the normal retirement age or	reduced rate, with survivor s benefits. Child' at death, if earlier.	's benefit will commence only
C. DEFERRED RETIREMENT BE RETIREMENT AGE (ARTICLE 30	ENEFIT FOR PARTICIPANTS AT ANY AG ) (See notes 2, 3 and 4)	E UNDER THE NORMAL
Full deferred pension, with sur	vivor.s benefits, payable at the normal retir	ement age
	e paid, at a reduced rate, on or after age 5 ly one month prior to the age at which you	
-9	ble under any form of deferred pension.	
January 2014. It is age 62 for those	ge is 65 for those whose participation comme e whose participation commenced or recon e continuous participation had commenced	nmenced on or after 1 January
D. WITHDRAWAL SETTLEMENT	AT ANY AGE UNDER THE NORMAL R	ETIREMENT AGE (Article 31)
A final cash withdrawal settlen	nent which will extinguish all other entitleme	ents
Date:	Signature:	

ONLY Page 2 & 3 of Form Pens

Withdrawal settlement (participation more than 5 y.)

ART II - PAYMENT INSTRUCTIONS (PLEASE	E PRINT or TYPE - DO NOT USE ABBREVIATIONS)  , hereby submit
(Surname)	(First) (Middle)
	name to your account only. If you do not have a bank account and to be sent in care of a United Nations office. Payment cannot be
. Payment Instructions (If payment instruction	ns are not completed in full, this form will be returned, causing delay in
ayment of benefit.)	,
1. MONTHLY BENEFIT	
y remittance to my account as follows:	
NAME OF FINANCIAL INSTITUTION	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICABLE)	
,	
	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
(ADDRESS)	code, etc. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COUNTRY)	,
	ank indicating bank codes and preferred routing for international
payments.	
2. LUMP SUM (Complete only if different fro	om above.)
y remittance to my account as follows:	
NAME OF FINANCIAL INSTITUTION	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPLICABLE)	
,,	
	Indicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting
(ADDRESS)	code, etc. as required by your bank for direct deposit.
(CITY, STATE, POSTAL CODE, COUNTRY)	)
3. Currency of Payment: Lump Sum	Monthly Ponefit
	Monthly Benefit  (Please Specify)
	ency selected by the recipient. Unless indicated otherwise,
	U.S. dollars. With respect to the lump sum, if any currency other
	sion from U.S. dollars will be done by the bank without Pension
Fund involvement.	J. J
. Mailing address (to be completed in all ca	asos):
. maning address (to be completed in all Ca	accej.
(Number and Street)	(City) (State or Province)
(	(,)
	(Zip or Postal code) (Country)
(Personal Email Address)	(Best phone number (Home or Cell)
Date:	Signature:
	orginature.

Z

PENS.E/7(4-01)-

## Payment Instruction when opting for withdrawal settlement





**ONLY Page** 2 of Form Pens E/6

\*(The only exception is the rare case where administrative rule J.2(c) is applicable)

#### UNITED NATIONS JOINT STAFF PENSION FUND INSTRUCTIONS FOR PAYMENT OF BENEFITS **UID Number** (For participants with less than 5 years of Contributory Service) PLEASE PRINT or TYPE - DO NOT USE ABBREVIATIONS hereby submit (First) payment instructions for the benefit payable to me. NOTE: Payment will have to be made in your name to your account only. If you do not have a bank account and are unable to open one, then payment may be sent in care of a United Nations office. Payment cannot be remitted to a mailing address, nor can it be made to a third party. A. Payment Instructions: By remittance to my account as follows: NAME OF FINANCIAL INSTITUTION BANK ACCOUNT NUMBER (NAME OF BRANCH, IF APPLICABLE) dicate your SWIFT, ABA, Routing, BLZ, ABI, CAB or sorting ode, etc. as required by your bank for direct deposit NOTE: Benefits may be payable in any currency selected by the recipient. Unless indicated otherwise. payment of your benefit will be made in U.S. dollars. If any currency other than US dollars is selected, the conversion from U.S. dollars will be done by the bank without Pension Fund involvement.\* Currency of Payment: U.S. Dollars or Other Currency (Please Specify) B. Mailing Address (to be completed in all cases): (Number and Street) (Personal Email Address) Best phone number (Home or Cell)

PENS.E/6 (5-01)-E

## Payment Instruction when opting for Deferment of choice



UNITED NATIONS JOINT STAFF PENSION FUND INSTRUCTIONS FOR PAYMENT OF BENEFITS

(For participants with less than 5 years of Contributory Service)

## UID Number

## E6 – less than 5 years

- As a participant with less than five years service in the Pension Fund you will, upon separation, become entitled to a withdrawal settlement under Article 31(b)(i) of the Regulations.
- If you believe you are entitled to a different type of benefit, you should not complete this form but should refer the matter to the Secretary of your Staff Pension Committee. In particular, if you claim entitlement to a disability benefit, please refer to Administrative Rule H.6.
- If you wish to elect deferment of payment for up to 36 months under the terms of Article 32 of the Regulations, please enter your mailing address and sign the statement below.
- If you wish to receive your payment as soon as possible, kindly complete page 2 of this form only and return the form to the Secretary of your Staff Pension Committee.
- 5. Please refer to Article 46 of the Regulations regarding the forfeiture of benefits.

NOTE: The following portion is to be completed ONLY if you elect deferment of payment under Article 32 of the Regulations; please note that your account accrues interests only until your separation date. If you elect such deferment, please return this page to the Secretary of your Staff Pension Committee and RETAIN page 2, to be used when notifying your final decision.

(Print Name)	, wish to defer p	ayment of my benefit for a period of up		
(Print Name)				
to 36 months, as provided for in Article	32 of the Regulations.			
My future mailing address is:				
.,				
		(City)		
(Number and Street)				
(State or Province)	(ZIP or Postal code)	(Country)		
(State of Floringe)	(Zir Gir Gatal Gode)	(Country)		
(Personal Email Address)		Best phone number (Home or Cell)		

ONLY Page 1 of Form Pens E/6 or E/7



#### 

#### UNITED NATIONS JOINT STAFF PENSION FUND INSTRUCTIONS FOR PAYMENT OF BENEFITS

## E7 – more than 5 years

	UID	Nun	nber		

As a participant in the Pension Fund you will, upon separation, become entitled to one of the benefits indicated on page 2. To assist you in filling out this form, you should read the instructions below since all parts of the form do not necessarily apply to your situation.

If you believe you are entitled to a disability benefit you should not complete this form, but should refer to Article 33 and relevant Administrative Rules H

- If you wish to elect deferment of payment or choice of benefit (under the terms of Article 32 of the Regulations), the ONLY action
  required by you is to enter your mailing address and sign the statement below. Please note the important provision of Article 32,
  which applies if you defer election, but make no final choice within 36 months. However, in accordance with Article 44 the Fund
  shall not be liable for interest on any due but unpaid benefits.
- If you wish to submit payment instructions at this time, please complete this form as follows:
  - You should complete Parts I and II, and sign the form on pages 2 and 3.
  - b) If you have less than 5 years of contributory service, you should NOT complete this form, but should get in touch with the Secretary of your Staff Pension Committee.

(Please read carefully the notes which are intended as a guide to the benefit to which you may be entitled.)

- Completed form should be sent to the Secretary of your Staff Pension Committee.
- Additional points to be noted:
- A participant is not deemed to have reached the age of 55, 58, 60, 62 or 65 until the end of the day of his/her 55n, 58n, 60n, 62nd or 65m birthday, respectively.
- b) Entitlement to a benefit does not exist until a participant separates from service.
- No benefit can be paid until documentation is processed and payment is certified by the Chief Executive of the Pension Fund.
- Monthly pension benefits may be subject to cost-of-living adjustments.
- Articles 34, 35, 35 bis, 36 and 37 of the Regulations automatically provide for certain benefits in respect of eligible widows, widowers, divorced surviving spouses, children or secondary dependants.
- 6. Full commutation into a lump sum may be possible where the amount of a periodic benefit would be below US\$1000 per year.
- You should have on file a "Designation of Recipient of Residual Settlement form. Any desired change in such designations should be submitted on form PENS.A/2.
- 8. Please refer to Article 46 of the Regulations regarding forfeiture of benefits.

NOTE: The following portion is to be completed ONLY if you elect deferment of payment under Article 32 of the Regulations; please note that your account accrues interests only until your separation date. If you elect to such deferment, please return this page to the Secretary of your Staff Pension Committee and RETAIN pages 2 and 3, to be used when notifying your final decision.

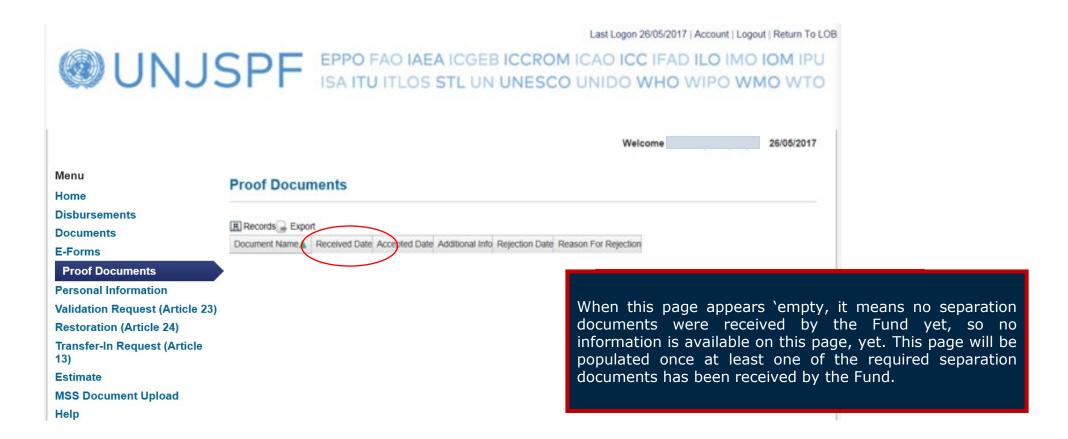
I, period	(Print Name) I of up to 36 months from the date of m		nyment or choice of benefit for a cle 32 of the Regulations.
My fut	ture mailing address is:		
	(Number and Street)	(City)	(State or Province)
		(Zip or Postal code)	(Country)
_	(Personal Email Address)	(Best phon	e number (Home or Cell)
Date		Signature:	
		1	PENS.E/7(4-01)-

PENS.E/6 (5-01)-E

## Tracking the Fund's receipt of your separation documents



Inside your UNJSPF Member Self-Service portal, under the PROOF DOCUMENTS tab, you can track receipt by the Fund of the three key separation documents required for your case by the Fund (PF4/SEP, SEPPA and PI)



## Tracking the Fund's receipt of your separation documents



### How to read the MSS Proof Documents tab:

# Menu Home Disbursements Documents E-Forms Proof Documents Personal Information Validation Request (Article 23) Restoration (Article 24) Transfer-In Request (Article 13) Estimate MSS Document Upload

#### **Proof Documents**

ONLY THOSE PARTICIPANTS WHOSE SEPARATION DATE IS ON OR AFTER 01 MARCH 2017 WILL BE ABLE TO TRACK RECEIPT OF THEIR SEPARATION DOCUMENTS.

This tracking table provides you with the status of receipt of the separation documents required by the UNJSPF to commence processing your separation benefit. The 'Received' date is automatically updated as soon as a separation document has reached the UNJSPF and has been incorporated (or 'indexed') to your personal UNJSPF case file.

The review process for a separation case commences only upon receipt by the Fund of the <u>complete</u> set of the <u>required and duly completed separation documents</u> (or 'Proof Documents') for a separation case.

These required separation documents are:

- (1) Your <u>original</u> Payment Instructions (PI) on UNJSPF Forms: E6, E7, E8 or E2 (as applicable for your case).
- (2) Duly completed, <u>original</u> Separation Notification PF/4 for UN Family organisations or PENS,E/4 for Specialised Agencies
- (3) <u>Copy</u> of the **Separation Personnel Action SEPPA or P35** (for UN Family organisations only)

Moreover, <u>for those requesting retirement and disability benefits</u>, additional supporting documentation, i.e., copies of your birth certificate and the birth certificates of your eligible dependants, your marriage and/or divorce certificate are required. Therefore, you should submit these additional documents as applicable together with your Payment Instructions form to avoid delays in the processing of your benefit.

These Proof documents undergo a full review in the UNJSPF and the reviewer will update each relevant item in the table with either (1) an 'Accepted' date, if the document received is acceptable, OR (2) a 'Rejection' date and 'Rejection reason' if the document is not acceptable. In case of a rejection, the Fund will follow up directly with you or the organisation to request what is needed. Case processing would be pending until receipt of acceptable document/s.

When all documents pass the Fund's quality control, i.e., are confirmed acceptable by the Fund, the calculation of your benefit will begin.

For more detailed information about the required separation documentation, the separation process and the benefit processing time frame please refer to the MSS HELP tab and follow the 'proof documents' link.



Menu
Home
Disbursements
Documents
E-Forms
Proof Documents
Personal Information
Validation Request (Article 23)

One or several of the key required three separation documents were received by the Fund. The "Received Date" has been populated for the document received. Once the Fund has reviewed the documents and confirmed they are acceptable, the "Accepted Date" is also populated for each document approved.

#### Proof Documents

ONLY THOSE PARTICIPANTS WHOSE SEPARATION DATE IS ON OR AFTER 01 MARCH 2017 WILL BE ABLE TO TRACK RECEIPT OF THEIR SEPARATION DOCUMENTS.

This tracking table provides you with the status of receipt of the separation documents required by the UNISPF to commence processing your separation benefit. The 'Received' date is automatically updated as soon as a separation document has reached the UNISPF and has been incorporated (or 'indexed') to your personal UNISPF case file.

The review process for a separation case commences only upon receipt by the Fund of the <u>complete</u> set of the <u>required and duly completed separation documents</u> (or 'Proof Documents') for a separation case.

These required separation documents are:

- (1) Your <u>original Payment Instructions</u> (PI) on UNJSPF Forms: E6, E7, E8 or E2 (as applicable for your case).
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For more detailed information about the required separation documentation, the separation process and the benefit processing time frame please refer to the MSS has tab and follow the 'proof documents' link.



## **Contacting the UNJSPF**

## **Contacting the UNJSPF**



Participants from <u>UN agencies</u> should contact <u>their SPC</u> for pension-related queries.

Participants from the <u>UN Secretariat</u> and related entities should contact <u>the Fund</u> directly using the contact details provided on the Fund's <u>Contact Us</u> <u>page</u>.

Always use the official contact channels, to ensure that your queries are duly received, acknowledged, tracked, routed internally for review and you receive a timely response.

Contact Us



Services to clients can only be provided in the two official working languages of the Fund, English and French.

Online

Phone

In-person

Submit documents





## THANK YOU!!

Q&A