

MUNICIPAL FIRE & POLICE RETIREMENT SYSTEM OF IOWA

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(888) 254-9200
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RETIREE/BENEFICIARY REQUEST FORM

First Name

Middle Initial

Last Name

Street Address

Street Address

City

State

Zip

Phone (include area code):

I would like to request a (check at least one):

1. Income Verification

2. Duplicate Deposit Notification

Month/Year

Month/Year

Month/Year

3. Duplicate 1099R

Year

Year

Year

Requested Information will be mailed to the address on file in the System's office. If your address has changed, please complete and sign an address change form. Address change forms can be obtained from the System's website.