



**ELECTION BY ELECTED COUNTY OFFICIAL TO CONTINUE PARTICIPATION
IN IMRF ELECTED COUNTY OFFICIAL PLAN** (Plan closed by P.A. 97-0609, effective 8/26/2011)

IMRF Form 6.21B (Rev. 02/12)

PLEASE REFER TO THE INSTRUCTIONS ON THE BACK OF THIS FORM

Please print or type – use black ink

Elected County Official's First name	Middle Initial	Last	Jr., Sr., II, etc.
Social Security Number ____-____-____	Current Office Title	Current Office Expires on:	Department Code
Employer name			Employer IMRF I.D. Number
Street (mailing) address		City, State and Zip + 4	

DECLARATION BY ELECTED COUNTY OFFICIAL

I elect to continue to participate in the IMRF Elected County Official (ECO) plan during my new term of office.

ACKNOWLEDGEMENTS

- I will contribute 7.50% of earnings and will be eligible for ECO benefits as described in the IMRF publication, "IMRF Revised Elected County Official Plan under P.A. 91-0685."
- To be eligible for the IMRF Tier 1 ECO formula, I need eight years of ECO service in the same position with the same county. To be eligible for the IMRF Tier 2 ECO formula, I need eight years of ECO service in the same position with the same county, but 10 years of total service credit.
- **My participation in the ECO program expires at the end of my current term of office. If I am re-elected, I must complete a new Form 6.21B at the beginning of my new term of office to remain in the ECO program.**
- If I am **appointed** to an elected position that qualifies for the ECO program, and wish to continue in ECO in that position, **I must complete a new Form 6.21B at the beginning of my new term of office to remain in the ECO program.**
- **If I choose to stop participating in ECO, that decision will be irrevocable.**

Signature of Elected County Official

Date

CERTIFICATION BY AUTHORIZED AGENT

I certify that the position which the above named person occupies qualifies him or her for membership in ECO. I further certify that ECO member contributions (7.50%) will be made from the member's earnings beginning with earnings paid in

_____ 20 _____. (Refer to instructions on back.)

Signature of Authorized Agent

Date

Illinois Municipal Retirement Fund

2211 York Road, Suite 500, Oak Brook Illinois 60523-2337
Member Services Representatives 1-800-ASK-IMRF (1-800-275-4673)

Instructions

Authorized Agent:

- After filing this form, the Authorized Agent should notify its payroll unit to continue to deduct the appropriate member IMRF contributions of 7.5%.

Member:

Participating in the ECO Plan

- You must have **first** elected to participate in the ECO Plan **before August 26, 2011**.
- **Your participation in the ECO program expires at the end of your current term of office.**
 - If you are re-elected, **you must complete a new Form 6.21B at the beginning of your new term of office** to remain in the ECO program.
 - If you leave office (e.g., complete the term of office and are not re-elected or if you quit or resign), your participation in the ECO Plan will terminate unless you hold another ECO-eligible position with the same county **and** file a new Form 6.21B.
 - If you are **appointed** to an elected position that qualifies for the ECO program and you wish to continue in ECO in that position, **this form must also be completed**.