



7. I acknowledge and agree that if the Board grants my request and transfers contributions to my Home Local Pension Fund, such decision by the Board is final and binding. I waive on my behalf, and my heirs, successors and assigns, any right to receive any accrued benefit from the Central Pension Fund, based upon the contributions and hours of service transferred to my Home Local Pension Fund pursuant to this request.
  
8. I understand that my Home Local Pension Fund may have imposed time limits upon transferring or accepting contributions under Money Follows the Man Reciprocity and the Central Pension Fund shall not be liable in the event my Home Local Pension Fund rejects my transfer request on the basis of its time limits.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State Zip

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
Notary Public