



# Salt Lake County Sheriff's Office Mutual Aid Association



I, \_\_\_\_\_ will retire on \_\_\_\_\_.  
(Name) (Date)

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Social Security Number

I would like to receive my payout from the Mutual Aid in the following manner.

- A monthly payment of \$100.00 until paid.  
(Requires an account with Mountain America Credit Union)
- One time lump payment.

\_\_\_\_\_  
(Signature) (Date)

Payment is based on the number of years as a member in good standing of the Salt Lake County Sheriff's Office Mutual Aid Association. The monthly payment shall be made (without interest), beginning within 30 days of the effective date of retirement until the total sum is paid. All payments will be made to an account established by the member at a financial institution of the SMA's choice.

\$100.00 per month	
10 – 14 years	\$1000.00
15 – 19 years	\$1500.00
20 – 24 years	\$2500.00
25 – 29 years	\$3500.00
30 years or more	\$4000.00

Lump payment	
10 – 14 years	\$800.00
15 – 19 years	\$1200.00
20 – 24 years	\$2000.00
25 – 29 years	\$2800.00
30 years or more	\$3200.00

For Mutual Aid use only		
Date Joined	Total Years in SMA	Total Payout

\* Membership join date will be verified by the SMA \*

