

CONSENT TO NEW YORK JURISDICTION AND RELEASE

I, _____, a **Participant** in the Metropolitan Transportation Authority Defined Benefit Pension Plan (“the Plan”), do hereby consent that the Domestic Relations Order issued by Judge _____, in the State of _____, County of _____, dated _____, be treated by the Plan as a Domestic Relations Order pursuant to the Equitable Distribution Law of the State of New York.

I further authorize the Plan to deduct payments from my retirement benefit pursuant to the provisions of the above referenced Order; and I hereby release the Plan from any liability whatsoever as a consequence of any payments based upon such Order.

(Participant’s signature)

This acknowledgment must be completed by a Notary Public.

State of _____,

ss:

County of _____,

On the ____ day of _____, in the year _____, before me personally appeared _____, known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his /her signature on the instrument, the individual or the person on behalf of which the individual acted, executed the instrument.

Notary Public, State of _____

(please affix stamp)