

Office of the New York State Comptroller

New York State and Local Retirement System

Employees' Retirement System

Police and Fire Retirement System

110 State Street, Albany, New York 12244-0001

RECEIVED

## Name Change Notice RS 5483

(Rev. 2/11)

PLEASE PRINT CLEARLY USING CAPITAL LETTERS. USE ONLY BLUE OR BLACK INK.		
	F	Registration Number
Last Name	First Name	M.I.
Old Name		
Last Name	First Name	M.I.
New Name		
Last 4 Digits of Social Security Number	r* Telephor	ne Number
Reason for Name Change (Fill in one circle):  O Change in Marital Status  O Court Order  O Religious  O Other (Please specify)		
	(Please provide Court Order) (Please provide Court Order)	
Member Signature	_	Date
Please sign with new name		

## PERSONAL PRIVACY PROTECTION LAW

In accordance with the Personal Privacy Law you are hereby advised that pursuant to the Retirement and Social Security Law, the Retirement System is required to maintain records. The records are necessary to determine eligibility for and to calculate benefits. Failure to provide information may result in the failure to pay benefits. The System may provide certain information to participating employers. The official responsible for maintaining these records is the Director of Member and Employer Services, New York State and Local Retirement Systems, Albany, NY 12244; telephone number (518) 474-8482.

## \*SOCIAL SECURITY DISCLOSURE REQUIREMENT

In accordance with the Federal Privacy Act of 1974, you are hereby advised that disclosure of the Social Security Account Number is mandatory pursuant to Sections 11, 31, 34 and 334 of the Retirement and Social Security Law. The number will be used in identifying retirement records and in the administration of the Retirement System.