

## 1. Information about you

Last name	First name	MI	Account ID or SSN
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## 2. Name change

Last name	First name	MI
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Attach a copy of marriage certificate; a certified copy of the divorce decree; or if unrelated to marriage or divorce, a court approval of legal name change.

## 3. Current address and phone number

Street address			
City		State	Zip code
Daytime phone number		Alternate phone number	

## 4. Marital status verification

Check the marital status that most accurately reflects your current status and provide the requested documentation.

If you are...	Then provide this documentation...
<input type="checkbox"/> Married/Remarried	1) Copy of marriage certificate; and 2) If previous marriage(s) ended in divorce, certified copy of divorce decree or final court order
<input type="checkbox"/> Divorced	Certified copy of divorce decree or final court order
<input type="checkbox"/> Widowed	Copy of spouse's death certificate
<input type="checkbox"/> Single/Never Married	No documentation required

## 5. Required signature (please sign below)

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I hereby certify the information that I have provided on this form is true and correct to the best of my knowledge and belief.

Data collected on this form will be used by MSRS staff for identification and documentation. The individual's Social Security number, birth date and address are classified as private and will not be shared with an unauthorized person without written consent.

Participant Signature \_\_\_\_\_ Date (Required) \_\_\_\_\_  
Month / Day / Year

### Send pages 1 and 2 to:



60 Empire Drive, Suite 300  
St. Paul, MN 55103-3000



Fax: 651.297.5238



Telephone: 651.296.2761  
Toll-free: 1.800.657.5757, option 3