



PUBLIC EMPLOYEES RETIREMENT ASSOCIATION OF NEW MEXICO

PUBLIC EMPLOYEES RETIREMENT BOARD

P.O. Box 2123, Santa Fe, New Mexico 87504-2123

(505) 827-4670 fax (505) 827-4700 voice

www.state.nm.us/pera

**CHANGE IN PERA RECORDS**

Instructions: Please print or type in black ink. Required fields are in **BOLD ITALICS**

ACTIVE MEMBER  RETIRED MEMBER

<b>MEMBER INFORMATION (Must be completed in all cases)</b>		
<b>SOCIAL SECURITY NUMBER</b>		<b>DATE OF BIRTH</b> <i>(mm/dd/ccyy)</i>
<b>FIRST NAME</b>	MI	<b>LAST NAME</b>
<b>PLAN MEMEBERSHIP</b> <input type="checkbox"/> PUBLIC EMPLOYEES <input type="checkbox"/> JUDICIAL <input type="checkbox"/> MAGISTRATE <input type="checkbox"/> VOLUNTEER FIRE <input type="checkbox"/> LEGISLATIVE		
<b>NAME CHANGE/CORRECTION</b>		
<b>CURRENT FIRST NAME</b>	MI	<b>LAST NAME</b>
<b>PREVIOUS FIRST NAME</b>	MI	<b>LAST NAME</b>
<b>EFFECTIVE DATE OF CHANGE</b> <i>(mm/dd/ccyy)</i>		
<b>ADDRESS CORRECTION</b>		
<b>ADDRESS TYPE</b> <input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY <input type="checkbox"/> MAILING		<b>HOME TELEPHONE NO.</b>
<b>ADDRESS</b>		BUSINESS TELEPHONE NO.
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PROVINCE</b>	<b>POSTAL CODE</b>	<b>COUNTRY</b>
<b>EFFECTIVE DATE OF CHANGE</b> <i>(mm/dd/ccyy)</i>		E-MAIL ADDRESS
<b>MARITAL STATUS CHANGE/CORRECTION</b>		
<b>MARITAL STATUS/EFFECTIVE DATE OF CHANGE</b> <i>(mm/dd/ccyy)</i>		
<input type="checkbox"/> MARRIED    /    / <input type="checkbox"/> DIVORCED    /    / <input type="checkbox"/> WIDOWED    /    /		
<b>SOCIAL SECURITY NUMBER CHANGE/CORRECTION</b>		
<b>OLD SOCIAL SECURITY NUMBER</b>	<b>NEW SOCIAL SECURITY NUMBER</b>	<b>EFFECTIVE DATE OF CHANGE</b>
<b>MEMBER AUTHORIZATION</b>		
<b>SIGNATURE OF MEMBER</b>		<b>DATE</b>