

Section 1

## 2023 Volunteer Firefighter Service Credit Qualification Record Current Active (Non-Retired) VFD Members Only

6300 Jefferson St NE Ste 100 Albuquerque, NM 87109 (505) 476-9300 phone (505) 954-0342 fax www.nmpera.org

Instructions: Please print or type in dark ink. This form must be completed in its entirety and returned in hard copy and electronic copy format to PERA along with the Annual Reporting form by March 31, 2024 via RIO and by regular mail, fax, or e-mail to peramemberservices@state.nm.us for processing. Strikethroughs and correction fluid/tape are not permitted.

Please keep copies for your VFD's records.

Information about your Volunteer Fire Department

Name of VFD			PEF 	A VFD Number (5 digits)	County		
Sec	ction 2	Inform	nation about your Current Acti	ve (Non-Retired) VFD	Members Or	nly	
Vol No.	Social Security Number (Required to award service credit; digits only-no dashes)		Full Name of Volunteer Firefighter (Provide mailing address for each member)		Date of Birth (mm/dd/yyyy)	Service Credit Eligibility Met? (Check one)	
1.	oniy-no d	dasnes)	Name: Address:			Yes	No
2.			Name: Address:				
3.			Name: Address:				
4.			Name: Address:				
5.			Name: Address:				
6.			Name: Address:				
7.			Name: Address:				
8.			Name: Address:				
9.			Name: Address:				
10.	.0.		Name: Address:				
Sec	ction 3	Volunt	eer Firefighter Department Ce	rtification			
Signature		-	Title	Date			