

Change In Retirement Date

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Instructions: Please print or type in dark ink. This form must be completed in its entirety and returned to PERA via regular mail, fax, or e-mail to noreply.records@pera.nm.gov for processing. Failure to complete and submit this form in its entirety may result in your retirement benefit being postponed.

	Check One: New	Change In Ex	xisting Information	
Section 1	Information About You			
	_			I
Social Security Number	or PERA ID Name	e (First, Middle Initial,	Last)	
	()			
Date of Birth (mm/dd/y	yyy) Phone Number	E-mail Addr	ess	
Mailing Address		City	State	Zip Code
Section 2	Information About Your Ret	irement Date		
☐ I respectfully rec	uest that my current employment		mm/dd/yyyy	to a
new effective te	rmination date of	with a planned	d retirement date of	ууууу
- OR -				
☐ I respectfully re	quest my retirement date be susp	ended. I understand	I am responsible for com	pleting and
submitting a ne	w PERA Change In Retirement Dat	e form with my new	retirement date. If my ne	w retirement
date exceeds m	y original retirement date by six m	nonths, I understand	I that I have to complete a	nd submit a new
PERA Retiremer	nt Kit.			
Section 3	Your Authorization			
I understand that my required, I will submit	new retirement date is subject to vit to PERA 60 days prior to the new re	verification of eligibilitetirement date.	ry by PERA staff. If a new PI	ERA Retirement Kit is
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Signature of Applican	t		Date	