

Submit completed form to: SDRS, PO Box 1098, Pierre, SD 57501 Email: <u>sdrsweblink@state.sd.us</u> Fax: 605-773-3949 Questions? Call 605-773-3731 or 1-888-605-SDRS (long-distance callers only)

## **Personal Information**

SDRS ID or Last Four Digits of SSN	Last Name		First Name	МІ
Drive and Discuss Neural and		0	Dhana Numhan	
Primary Phone Number		Secondary Phone Number		
Primary Email		Secondary Email		
In providing your email address, you are granting SDRS permission to include your email address on the SDRS email list. You may unsubscribe from this list at any time by contacting SDRS.				

# Please complete applicable section(s) and sign below.

## Mailing Address Change

Old Mailing Address	City	State	ZIP
New Mailing Address	City	State	ZIP

### **Marital Status Change**

Update marital status d	[	∃ Divorce (Atta	Marriage (Attach photocopy of marriage certificate) Divorce (Attach photocopy of divorce certificate/decree) Death (Attach photocopy of spouse's death certificate)			Note: SDRS cannot update your marital status until documentation is received.	
Spouse's Last Name	Spouse's Last Name			Spouse's First Name		MI	
Spouse's Gender □ Male  □ Fema	ale	Spouse's Date	of Birth	SDRS advises members to update their beneficiary designations there is a marital status change by completing a new beneficiary designation form, available online at https://www.sd.gov/sdrs.			eficiary
Date of Marriage	lf applicat Death	ble, Date of	If applicable, Date o Divorce	f	If Divorced: Is there a Qua □ Yes (Attach pho		Gorder (QDRO)? ∃ No

## Name Change

Last Name	First Name		MI
Attach photocopy of one form of documentation verifying name change:	age Certificate	Court Order	

#### Signature

I declare and affirm under the penalties of perjury that this information has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.					
Attach a photocopy of one of the following forms of identification: Driver License	Passport	Govt-issued Nondriver ID			
Signature		Date			