

CHANGE OF NAME AFFIDAVIT

I hereby certify that I am a member of the Merced County Employees' Retirement Association. I became a member under the name of:

My name has been changed to: _____

Please state the reason for name change: _____

If reason is marriage or divorce, please include a copy of your marriage license or divorce decree.

I hereby request that the records of the Merced County Employees' Retirement Association be changed accordingly.

Date

Signature

Social Security Number of Employee

Department

Date

Witness