

## CERTIFICATION OF MARITAL STATUS (MERS)

### PART I - GENERAL INFORMATION AND INSTRUCTIONS - PLEASE READ CAREFULLY

Unmarried (single) members of MERS may choose any payment election option they wish to choose although Option D (the single life annuity option) is considered the default option for such members. Single members must execute the Affidavit below (Part II) attesting to the fact that they are not married or subject to a spouse's consent.

Members who have been married less than one year (twelve months) as of the date of retirement are not *required* to (although they may choose to do so) provide a lifetime benefit (Option A or B) to their spouse. A member who has been married under one year at the time of retirement is treated as a single person under MERS with regard to the selection of a payment option. Accordingly a MERS member who has been married under one year may choose any payment option he or she wishes but needs to execute the Affidavit below (Part III) if they do not provide an option that provides a lifetime benefit for their spouse.

**Single Members:** Must fill out and execute **Part II** of this form.

**Members Married Less Than One Year:** Must fill out and execute **Part III** of this form if they do not select an option that provides a lifetime benefit to their spouse.

MEMBER'S NAME (Last)	First Name	M.I.	SOCIAL SECURITY NO.
MUNICIPALITY	Member ID	DATE OF RETIREMENT	

### PART II - SINGLE MEMBER AFFIDAVIT

I am over the age of eighteen and understand the obligations of an oath. I hereby certify and otherwise attest that I am not married as of the date of retirement noted above nor subject to a spouse's consent for the payment election form I have chosen. I understand that willfully falsifying statements on this form can be punishable by fine or imprisonment. (U.S. Code Title 18, Section 1027).

\_\_\_\_\_  
SIGNATURE OF MEMBER

\_\_\_\_\_  
DATE

**Notary certification:** I hereby certify and affirm this Affidavit was signed by the person whose signature appears above. Signed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of notary public: \_\_\_\_\_

State: \_\_\_\_\_ Town: \_\_\_\_\_ My commission expires \_\_\_\_\_ SEAL HERE

### PART III - MARRIED LESS THAN ONE YEAR MEMBER AFFIDAVIT

SPOUSE'S NAME (Last)	First Name	M.I.	DATE OF MARRIAGE
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I am over the age of eighteen and understand the obligations of an oath. I hereby certify and otherwise attest that while I am married as of the date of my retirement I have been married less than twelve (12) months and thus I can select any payment election option I choose because I am not subject to a spouse's consent. Before signing this certification, I acknowledge that although I have the right to choose a payment option that does not provide my spouse with lifetime benefits I do so with the understanding that such a selection may have an adverse financial impact on my spouse after my death. I understand that willfully falsifying statements on this form can be punishable by fine or imprisonment.

\_\_\_\_\_  
SIGNATURE OF MEMBER

\_\_\_\_\_  
DATE

**Notary certification:** I hereby certify and affirm this Affidavit was signed by the person whose signature appears above. Signed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

SEAL HERE

Signature of notary public: \_\_\_\_\_

State: \_\_\_\_\_ Town: \_\_\_\_\_ My commission expires \_\_\_\_\_

*Note: A copy of the member's marriage certificate must accompany this form.*