



#### Please attach to the birth date documentation the full name, Social Security number, and PID (if known), of the member whose account is to be changed/corrected. Your Name \_\_\_\_ Information First Middle/Maiden Last Address Street or P.O. Box State ZIP Code City Telephone Number Email Address Date of Birth

#### Acceptable Documents

Since a conflict has

arisen concerning your and/or your

beneficiary's date of

of Alabama, it will

birth.

be necessary for you

to furnish one of the

birth as listed with the Retirement Systems

#### Birth Certificate

An original or certified copy issued by the state in which birth occurred. Contact the Bureau of Vital Statistics in that state for the necessary forms and instructions.

## **Delaved Birth Certificate**

An original or certified copy issued by the state in which birth occurred. •

## Bureau of Census Report

• Report from the U.S. Census Bureau in Pittsburg, Kansas, stating the age of the individual at a census year when the person was less than 20 years old. This document is used to verify year of birth only.

#### following documents **Baptismal Record or Parish Record** as proof of date of

. An original or certified copy, wherein the age of the individual at the time of baptism is given.

## Family Bible Record

An original or certified copy giving the individual's date of birth. •

## School Record

An original or certified copy giving the individual's date of birth. .

#### **Insurance Policy**

Policy giving the individual's date of birth provided that it is dated prior to the date of entry into the Retirement Systems. .

## Driver's License

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A copy of the individual's state-issued driver's license. •

#### You may provide this office with an original document or a certified copy of the document.

- If an original document is submitted, it should be sent by registered or certified mail as a precaution against loss.
- If a copy is submitted, it must be certified by a Notary Public on the actual copy. We cannot accept the copy of any document, . not even the copy of a certified document, unless a Notary Public or other certifying official certifies the copy as true and correct.

# Certification

The following shows the correct manner for certification.

(name of Notary Public or certifying	a official), do hereby certif	'v that this is a true and co	prrect copy of the (name o	of document) for
		,		
name of member or name of benefic	ciary).			

Signature of Certifying Official \_\_\_\_\_\_

Title of Certifying Official \_\_\_\_\_

Date

(Official Seal)