



RSA-1 Investment Option Election for Regular Existing Accounts

Retirement Systems of Alabama
PO Box 302150, Montgomery, Alabama 36130-2150
877.517.0020 • 334.517.7000 • www.rsa-al.gov



Your SSN

Check one: Member Beneficiary

Your Information

Name _____
First Middle/Maiden Last

Address _____
Street or P.O. Box City State ZIP Code

Telephone Number _____ Email Address _____

Date of Birth _____ PID (optional) _____

Investment Option Election

I elect the following for my account. My investment option election will become effective the first day of the month following the actual receipt of this form by RSA-1. For example, if my election is to be effective June 1, my election form must be received by RSA-1 on May 31.

For this election, use either percentages or dollar amounts, not both.

Transfer _____ % OR \$ _____ from my **BOND** investment account to the **STOCK** investment account.

Transfer _____ % OR \$ _____ from my **BOND** investment account to the **SHORT-TERM** investment account.

Transfer _____ % OR \$ _____ from my **STOCK** investment account to the **BOND** investment account.

Transfer _____ % OR \$ _____ from my **STOCK** investment account to the **SHORT-TERM** investment account.

Transfer _____ % OR \$ _____ from my **SHORT-TERM** investment account to the **BOND** investment account.

Transfer _____ % OR \$ _____ from my **SHORT-TERM** investment account to the **STOCK** investment account.

Signature Certification

Signature of member or beneficiary if member is deceased.

I understand the following regarding this investment option election:

My election can be made **once every 90 days** after the effective date of my last election.

I may stop deferrals at any time; however, my election will remain in effect if I later resume deferrals.

My election can apply to the entire balance, a percentage of the balance, or a designated dollar amount of the balance in my account.

Sign Here → Your Signature _____ Date _____