ERS SMS
Act 66
09/08

STATEMENT OF MILITARY SERVICE
ACT 66

Retirement Systems of Alabama
P. O. Box 302150 ♦ Montgomery, AL 36130-2150
334-517-7000 or 877-517-0020
www.rsa-al.gov

The following information must be provided in order for active military service to be credited to your retirement account:

Name _____
First Middle Last

Address _____

Social Security Number: _____-_____-_____

I certify that I am a veteran of the Armed Forces of the United States and that the following describes my current retirement benefits on account of my military service.

If more than one category describes your situation, check all appropriate boxes.

- ☐ No benefit
- ☐ Service retirement benefit from a branch of the Armed Forces
- ☐ Service retirement benefit based partially on my military service from _____ _____ (State source of benefit, such as Civil Service Retirement, etc.)
- ☐ Disability retirement from a branch of the Armed Forces
- ☐ Disability retirement based partially on my military service from _____ _____ (State source of benefit, such as Civil Service Retirement, etc.)

Signature _____ Date _____

STATE OF _____ COUNTY OF _____ on this _____ day of _____, 20____, personally appeared before me the said named _____ _____ known to me to be the person described in and who executed the foregoing instrument and he (or she) acknowledged that he (or she) executed the same and being duly sworn by me, made oath that the statements in this document are true and correct.

Signature of Notary Public _____

Seal

My Commission Expires _____