



NMERB Benefit Estimate Request Form

Please print or type clearly and complete with black or blue ink only.

COMPLETED BY MEMBER

Name (First, Middle, Last)		Last 4 digits of SSN XXX-XX-	Address change <input type="checkbox"/> yes <input type="checkbox"/> no
Mailing address			
City	State	Zip	
Date of birth (mm/dd/yyyy)	Daytime phone	Email	

I hereby authorize NMERB to change my address as indicated above. Yes No



X

Member's signature

Date (mm/dd/yyyy)

Benefit Estimate Information

Retirement date (mm/01/yyyy)	Current gross fiscal year salary \$	Current job title
Beneficiary date of birth (mm/dd/yyyy)	Beneficiary type (check <u>one</u>) <input type="checkbox"/> Spouse <input type="checkbox"/> Non-spouse	Contract term (check <u>one</u>) <input type="checkbox"/> 9/10 month <input type="checkbox"/> 11/12 month

Do you have PERA service? yes no If yes, provide PERA agency name: _____

Instructions

1. Your request for a benefit estimate will be processed if you qualify for retirement on the requested retirement date and all information on this form is filled out correctly. Benefit Estimate requests require **4-6 weeks** to process. If you have PERA service the request may take longer. PERA is the retirement plan for New Mexico city, county, and state employees in non-educational positions.
2. The NMERB processes one estimate date, per eligible member, per year. If you'd like to review your information with other potential retirement dates, please log into your online MyNMERB account at www.nmerb.org. If you require further assistance, please email: member.help@state.nm.us.
3. Your requested retirement date must be within one year of today's date. Retirement dates are always on the first day of the month. (Example: July 1 or January 1).
4. The NMERB's calculations will be based on the final earnings on file if you have not provided a current gross fiscal year salary on this form.
5. Your Benefit Estimate will be mailed to the address on file. If you have provided an address change on this form, you **must** sign this form to authorize the NMERB to update your address.