



# Release of Claims to Community Property

Former Spouse to mail completed form to address below

## COMPLETED BY FORMER SPOUSE

I, \_\_\_\_\_ (XXX-XX-\_\_\_\_\_) the undersigned, as the former spouse of  
(print your full name) (last 4 digits of SSN)

\_\_\_\_\_ (XXX-XX-\_\_\_\_\_) do hereby release any and all claims known or  
(print NMERB member's name) (last 4 digits of SSN)

unknown, I may have, now or in the future, to any and all retirement benefits earned or credited to

\_\_\_\_\_. I understand and agree that all NMERB retirement benefits  
(print NMERB member's name)

accumulated by \_\_\_\_\_ are to be considered for the purposes of  
(print NMERB member's name)

distribution, his/her **Sole and Separate Property**.

By my signature below, I acknowledge that I have had the opportunity to review this Release of Claims with legal counsel and am signing of my own free will and accord.



X \_\_\_\_\_

Former Spouse's signature

\_\_\_\_\_

Date (mm/dd/yyyy)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Signed and sworn to before me by \_\_\_\_\_

(print former spouse's name)

on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

X \_\_\_\_\_

Notary public signature

\_\_\_\_\_  
My commission expires

Notary  
Stamp