

OKLAHOMA LAW ENFORCEMENT RETIREMENT SYSTEM

Personal Information Change

Please use this form to keep OLERS updated on any personal changes(address, add/remove spouse, add minor children, phone #, etc.) you may have so we can provide accurate information to our Actuary and ensure timely communication to membership.

To update your \$5,000 Death Benefit beneficiaries you will need to use Form 12.		
Applicant Information		
Applicant Name	Applicant SSN	
Address		
City	State	Zip Code
	Cell Phone	
Email		
Dependent Information		
Spouse Name	Marriage Date	
Spouse SSN		
Minor Child Name	SSN	Birth Date
PEMOVE SPOUSE: Name		Pason: Death Divorce
REMOVE SPOUSE: Name Reason: Death Divorce If you need to remove your spouse due to death or divorce, attach a copy of death certificate or divorce decree.		
To update your \$5,000 Death Ber	nefit beneficiaries y	ou will need to use Form 12.
Signature		
The Applicant stated above has attested t thereof, and that the information contained		
Date Applica	int's Signature	
Submission Information		
Completed form can be sent to OLERS via: Mail: 421 N.W. 13th, Suite 100, Okl Fax: (405) 522-5004 Email: forms@olers.ok.gov	ahoma City, OK 73103	

Reviewed

OLERS USE ONLY

Data

Entry