MARYLAND STATE RETIREMENT AGENCY
120 EAST BALTIMORE STREET
BALTIMORE, MD 21202-6700

IDENTIFICATION AFFIDAVIT FOR mySRPS

INSTRUCTIONS: Fill in **all sections** below. Please **print** clearly. Have a **Notary Public** present as you **sign** and **date** the form. Keep **a copy** for your records. **See the bottom of this page for info on how to submit the completed form to us.**

RETIREMENT USE ONLY

PARTICIPANT SOCIAL SECURITY NUMBER

PARTICIPANT DATE OF BIRTH

Day - Month - Year

PARTICIPANT NAME

First Initial Last

PARTICIPANT DAYTIME PHONE NUMBER

PARTICIPANT EMAIL ADDRESS (leave blank if you do not have an email address)

TO THE MARYLAND STATE RETIREMENT AGENCY: I solemnly affirm under the penalties of perjury and upon personal knowledge that the information I have provided in this affidavit is true.

SIGN IN THE PRESENCE OF A NOTARY PUBLIC.

Signature _____ Date signed _____

Sign in the Presence of a Notarial Officer (Notary Public, Clerk of the Court, etc.)

State of _____, County of _____ (or City of Baltimore)

Official stamp must be affixed

This form was acknowledged before me on the _____ day of _____, 20___,
By _____.
Name of individual whose signature is being acknowledged*

Signature of Notarial Officer _____

Title of office (*Notary Public, Clerk of the Court, etc.*) _____ My commission expires _____

☐ Check here if this notarial act involved a remotely located individual and the use of communication technology.

* IMPORTANT: If the name of the individual whose signature is being notarized is not filled in, this form will be invalid and have no legal effect.

PLEASE READ THIS INFORMATION CAREFULLY BEFORE SUBMITTING YOUR FORM

1. **When you should use this form:** You should use this form if you wish to register for the mySRPS secure website, but cannot complete your registration on line.
2. **IMPORTANT: You must get this form Notarized.** We can accept this form only if it is **notarized** by a Notary Public.
3. **How to send us your completed and Notarized form:** Mail the form to: Maryland State Retirement Agency, 120 E. Baltimore St., Baltimore, MD 21202-6700

   IMPORTANT! Please send your form **directly** to us. Only the MSRA can register you for mySRPS. **Do not** give this form to your employer.
4. **What we'll do when we receive your form:** We will review your form to make sure it is complete and valid. If it is, we will mail to your address on file the instructions and forms you need to finish registering for mySRPS.

Need help completing this form? Please contact a Retirement Benefits Specialist at 800-492-5909.