



Building your financial future

# Name Change Form

## DIRECTIONS

This form is for retirees or former employees who would like to change their name.

Current employees can contact the Department of Human Resources and log in to [www.icmarc.org](http://www.icmarc.org) to obtain a Name Change Form from ICMA-RC, if applicable.

### STEP 1

Please fill out your form, typed or printed in ink, and remember to sign.

### STEP 2

Submit your form...

...during our walk-in hours, Monday thru Friday, 10AM-12PM and 1PM-3P, with a photo ID

or

...by mailing your form to:  
Richmond Retirement System  
730 E. Broad Street, Suite 900  
Richmond, VA 23219

### STEP 3

Forms are processed the 15th of each month.

**THANK YOU!**

## PART A. MEMBER INFORMATION

Social Security #

Mailing Address

City/State/ZIP

Phone Number

Email Address

## PART B. OLD AND NEW NAME

OLD First Name	<input type="text"/>	NEW First Name	<input type="text"/>
OLD Last Name	<input type="text"/>	NEW Last Name	<input type="text"/>
OLD Middle Initial	<input type="text"/>	NEW Middle Initial	<input type="text"/>

## PART C. ATTACH 1 TO FORM

A marriage certificate     The court document named below:

A divorce order    \_\_\_\_\_

## PART D. CERTIFICATION

**I hereby authorize the RRS to change my name; documentation is attached.**

- I am the member
- I am a Power of Attorney or guardian, and documentation is attached

\_\_\_\_\_  
Signature

Date

RRS USE ONLY

Date Processed: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

ID Verified: \_\_\_\_\_

Form revised April 2015