Name:
Employee No.:
Date of Retirement:

STATE EMPLOYEES RETIREMENT COMMISSION PROOF OF BIRTH AFFIDAVIT

STAT	E OF CONNECTICUT	· · ·			
)ss			
COUNTY OF)			
			being duly swo	orn, deposes and says:	
1.	1. I am unable to comply with the rule of the State Employees Retirement Commission of the State of Connecticut requiring the filing of a properly attested certificate of my birth.				
2.	To the best of my ki	nowledge and belie	f I was born at		
			on the	day of	
		, 19 .			
3. In lieu of said certificate, I hereby accept and irrevocably establish s my correct and legal date of birth for all purposes of the State of Co					
			Signature		
before	ribed and sworn to me this				
day of	<u></u>	19			
Notar	y Public				
Comn	nissioner of the Supe	rior Court			

PLEASE NOTE

In addition to the completed affidavit, you must submit two (2) documents, as described on the instruction sheet provided to you, which support your claim of your exact birthdate.

INSTRUCTION SHEET FOR EMPLOYEE RELATING TO DATE OF BIRTH

In the event that you cannot obtain your birth certificate of certification of birth from a State Health Department, you must comply with the following:

- 1. Execute the attached affidavit, and
- 2. Supply the Retirement & Benefit Services Division with **two** of the following documents which **reference your date of birth**:
 - a. 1910/1920/1930/1940 Census Record (Department of Commerce, Bureau of Census, Washington, D.C.
 - b. Religious Record (such as certificate of baptism)
 - c. Insurance Record
 - d. Early School Record
 - e. Military Record
 - f. Passport
 - g. Naturalization Papers
 - h. Letter from Social Security stating Date of Birth
 - i. Hospital Record