



# Personal Information Change Request For Retired or Inactive Employees

If you are currently employed by an agency participating in the Virginia Retirement System Defined Contribution Plans, you must submit your personal information change to your employer.

- Commonwealth of Virginia 457 Deferred Compensation Plan  650271
- Virginia Cash Match Plan  650272
- ORP of the Commonwealth of Virginia for Political Appointees  650273
- ORP of the Commonwealth of Virginia for School Superintendents  650274
- Virginia Supplemental Retirement Plan  650275

**Participant Information** — Provide Name/Social Security Number as it currently appears on your account.

Last Name	First Name	MI	Social Security Number
			Employee Number (if applicable / mandatory for state CIPPS agencies)

**Name Change** — Attach a copy of marriage certificate, divorce decree, driver’s license or other legal documentation.

Last Name	First Name	MI
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**Personal Information Correction / Change**

- Married       Unmarried
- Female       Male

Mo	Day	Year
Date of Birth		

Attach copy of birth certificate.

Social Security Number

**Attach copy of driver’s license  
or photo identification.**

**Address and Phone Number Change** (Complete this section only if you have terminated.)

Address – Number & Street			
City (      )	State (      )	Zip Code	
Home Phone	Work Phone		
E-Mail Address			

**Required Signature** — I affirm the information I have provided on this form is true and correct, and I am no longer an active employee of an agency participating in the Virginia Retirement System Defined Contribution Plans. NOTE: This document must be signed in the presence of a Notary Public.

\_\_\_\_\_  
**Participant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Notary Public Signature**

\_\_\_\_\_  
**Commission Expiration Date**

**Payee forward to the Service Provider at:** ING Plan Administration  
Attn: Virginia Retirement Systems  
P.O. Box 56588, Jacksonville, FL 32241-6588

**Express Delivery Address:**  
ING Plan Administration  
Attn: Virginia Retirement Systems  
8900 Freedom Commerce Parkway  
Jacksonville, FL 32256-8264

\*Remitting via fax is deemed more secure than standard U.S. mail.

**Phone #:** 1-VRS-DC-PLAN1 (1-877-327-5261)  
**Fax #:** 1-888-998-8954