



J. KEVIN STITT
GOVERNOR

SARAH GREEN
EXECUTIVE DIRECTOR

Affidavit for Receipt of 1099R regarding Deceased TRS Member/Beneficiary

Under penalty of perjury, pursuant to 26 U.S.C. §6103(e)(3) and 26 U.S.C. §6103 (e)(7),

I, _____, hereby certify and affirm that I meet one of the following

categories:

- Next of kin of deceased TRS member/beneficiary, or
- Heir at law of deceased TRS member/beneficiary, or
- Designated beneficiary under a will of TRS member/beneficiary,

and am receiving the 1099R of TRS member/beneficiary _____,

SSN _____ for a tax, legal, or other legitimate purpose. I am requesting that this form

be mailed to: _____, _____, _____, _____.
Street Address City State Zip Code

The last-issued 1099R will be provided unless additional tax years are indicated here: _____

Affiant further sayeth naught.

Printed Name

Signature

ON THIS ____ day of _____, 20____, before me personally appeared _____, known to me to be the person who executed the foregoing Affidavit for Receipt of 1099R regarding Deceased TRS Member/Beneficiary, who affirmed and acknowledged the veracity of the statements made above and that he/she executed the same as his/her free act and deed.

(seal)

Notary Public

My Commission Expires: _____

Commission No.: _____