

**Received Date**

# Consent to New York Jurisdiction and Release

**RS6452**

Please type or print clearly  
in blue or black ink

**NYSLRS ID**

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**Social Security Number** [last 4 digits]

XXX-XX-

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**Retirement System** [check one]

Employees' Retirement System (ERS)

Police and Fire' Retirement System (PFRS)

(Rev. 6/21)

I, \_\_\_\_\_, as **Participant** in the New York State and Local Retirement System, do hereby consent that the Domestic Relations Order (DRO) issued by Judge \_\_\_\_\_ in the State of \_\_\_\_\_, County of \_\_\_\_\_ dated \_\_\_\_\_ be treated by the New York State and Local Retirement System as a Domestic Relations Order pursuant to the Equitable Distribution Law of the State of New York.

I further authorize the New York State and Local Retirement System to deduct payments from my monthly retirement benefit pursuant to the provisions of the DRO identified above and I hereby release the New York State and Local Retirement System from any liability whatsoever as a consequence of any payments based upon the DRO.

Participant's Signature \_\_\_\_\_

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### ACKNOWLEDGEMENT TO BE COMPLETED BY A NOTARY PUBLIC

State of \_\_\_\_\_ County of \_\_\_\_\_ On the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

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NOTARY PUBLIC (Please sign and affix stamp)