

**BOARD OF REGENTS
UNIVERSITY SYSTEM OF GEORGIA**

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As provided for by the Regents Optional Retirement Plan legislation, I hereby give notice to the Teachers Retirement System of Georgia (TRS) Board of Trustees of my selection of the optional retirement plan.

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... Hc 6Y 7ca d YH X Vm 9a d cn Y Y !!

..

Date of Birth

Last Name

First Name

Middle Initial

Address

City

State

Zip Code

I understand that this selection is irrevocable during the term of my membership in the TRS. I understand that this selection is irrevocable during the term of my membership in the TRS.

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