



Public Employees Retirement System of Nevada
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Toll Free 1-866-473-7768 Website www.nvpers.org

Retirement Option Reversion Form

I hereby request to revert my retirement allowance from the Option _____ to the unmodified Option 1 benefit. It is my understanding that by reverting my allowance to the unmodified Option 1 benefit, I will no longer provide a lifetime benefit for any beneficiary. I understand that the effective date of this change will be on the first of the month following the date this completed form is received in the PERS office. I recognize that the exercise of this election does not abrogate any obligation I might have with respect to community property.

Retirement counselors are available to discuss the revocation of selected option. Do not sign unless you understand the significance of this change. For Police/Fire Retirees: When you revert to the unmodified Option 1 benefit, your spouse will not be eligible for benefits under the Police/Fire Spouse Option.

Retiree Signature

Retiree Social Security Number

STATE OF _____

COUNTY OF _____

Signed or attested to before me on _____, 20_____, by _____

Name of Retiree

Signature of Notarial Officer

Affix Stamp or Seal

My commission expires _____

Acknowledgment by Spouse/Ex-Spouse

I fully understand and agree with the revocation of the above retired member's retirement option and beneficiary.

Spouse/Ex-Spouse Signature

STATE OF _____

COUNTY OF _____

Signed or attested to before me on _____, 20_____, by _____

Name of Spouse/Ex-spouse

Signature of Notarial Officer

Affix Stamp or Seal

My commission expires _____