

PARK EMPLOYEES' ANNUITY AND BENEFIT FUND of CHICAGO

55 East Monroe Street, Suite 2720 * Chicago, Illinois 60603

Tel. # (312) 553-9265 * Fax # (312) 553-9114

www.chicagoparkpension.org

Office Use Only: Membership ID# _____
--

ADDRESS/PHONE NUMBER CHANGE FORM

Current Date: _____ Date of Birth: _____

Member's Name: _____
(please print)

Member's SSN: _____

Member Status: Actively Employed On Disability Retired Widow

What is the effective date of change? _____

Is this a temporary change? YES NO

Do you have direct deposit? YES NO

Should we continue your direct deposit? YES NO

If there have been any changes to your direct deposit information, including any changes in joint account holder, please complete a new Direct Deposit Authorization Form.

New Address and Phone Number

Street Address: _____

City, State and Zip: _____

Primary Phone Number: _____

Mobile Number: _____

Email Address: _____

Signature: _____

Date: _____

Mail or Fax this Form to: 55 East Monroe Street, Suite 2720, Chicago, Illinois 60603

Fax # (312) 553-9114