



Los Angeles
Fire & Police Pensions

CHANGE OF ADDRESS

NAME: _____ **SOC. SEC. NO.** XXX-XX-_____

PLEASE CHECK ONE:

Permanent Address Change

Temporary Address Change Temp. Address Expiration Date: _____

OLD ADDRESS:

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTRY: _____

CHANGE TO (NEW ADDRESS):

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTRY: _____

TEL. NO: () _____ EFFECTIVE DATE: _____

MEMBER SIGNATURE

DATE

RETURN TO: Department of Fire and Police Pensions
 Attn: Service Pensions
 360 E. Second Street, Suite 400
 Los Angeles, CA 90012
 Fax: (213) 978-4504

For Questions: (213) 978-4575