



**CHANGE OF ADDRESS FORM**  
(CURRENT DROP PARTICIPANTS ONLY)

Name: \_\_\_\_\_  
Last First M.I.

Social Security Number (Last four digits): \_\_\_\_\_

**PLEASE NOTE:**

This Change of Address request will **ONLY update your mailing address** with Los Angeles Fire & Police Pensions. You must **ALSO** update your address with your employing department by using the appropriate forms:

Police Department Personnel	(213) 486-4630	Form 138
Fire Department Personnel	(213) 978-3750	Form F-8
Harbor Department Personnel	(310) 732-3480	"Change of Employee Personal Information Form"
Airport Police Personnel	(424) 646-5900	"Change of Employee Personal Information Form"

**OLD ADDRESS:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**CHANGE TO (NEW ADDRESS):**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If you have any questions regarding this form, please contact the  
DROP/Service Pensions Section at:**

**Los Angeles Fire and Police Pensions  
Attn: DROP/Service Pensions Section  
701 E. 3<sup>rd</sup> Street, Suite 200  
Los Angeles, CA 90013**

**Telephone: (213) 279-3100 or (844) 88-LAFPP (52377) Ext. 93100**

**Fax: (213) 628-7716**

**Email: dropsp@lafpp.com**