

CHANGE OF ADDRESS AND/OR NAME

SOCIAL SECURITY # OR EMPLOYEE ID # _____

RETIREE NAME _____

ADDRESS CHANGE:

NUMBER AND STREET _____ APT.# _____

CITY _____ STATE _____

ZIP CODE _____

TELEPHONE NUMBER () _____

NAME CHANGE:

PREVIOUS NAME _____

NEW NAME _____

MARITAL STATUS: _____

(Single, Married, Divorced, Widowed)

SIGNATURE _____ DATE _____

PLEASE SEND FUTURE ADDRESS CHANGES TO:

OAKLAND COUNTY – HUMAN RESOURCES
RETIREMENT UNIT - ATTN: DAWN WESTLUND
2100 PONTIAC LAKE RD
WATERFORD MI 48328-0440