



## Notification of Member's Change of Address

CITY OF  
TUCSON  
FINANCE DEPARTMENT  
RETIREMENT OFFICE

Date change is to be made effective: \_\_\_\_\_

New Address: \_\_\_\_\_  
\_\_\_\_\_

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

Social Security #: \_\_\_\_\_

Member's Name: \_\_\_\_\_

Old Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_