



San Joaquin County Employees' Retirement Association

6 S. EL DORADO ST, STE 400 STOCKTON, CA 95202-2804

DEFERRED MEMBER CHANGE OF ADDRESS

| | | | |
|---------------|--|---|------------------------|
| MEMBER | First Name | Middle Name | Last Name |
| | E-Mail Address (Optional) | | Social Security Number |
| | I authorize the SJCERA to notify the RPESJC of this address/phone change: <input type="radio"/> N <input type="radio"/> Y | I authorize the SJCERA to notify the DSA / PORAC of this address/phone change: <input type="radio"/> N <input type="radio"/> Y | Date of Birth |

Please change my mailing address and telephone number:

From:

| | | | |
|--------------------|-----------------------|----------------------------------|----------|
| OLD ADDRESS | Mailing Address | | |
| | | | |
| | | | |
| | City | State | Zip Code |
| | Home Telephone Number | Work (or Other) Telephone Number | |

To:

| | | | |
|--------------------|-----------------------|----------------------------------|----------|
| NEW ADDRESS | Mailing Address | | |
| | | | |
| | | | |
| | City | State | Zip Code |
| | Home Telephone Number | Work (or Other) Telephone Number | |

| | | |
|------------------|--|------|
| SIGNATURE | PLEASE SIGN AND DATE THIS FORM, AND RETURN TO THE SJCERA OFFICE. | |
| | Signature | Date |