

July 2009



424 ROUTE 8
MAITE, GUAM 96910
Phone Nos.: (671)475-8900/8901
Facsimile No.: (671)475-8922

ADDRESS UPDATE FORM

PLEASE ATTACH A PHOTO I.D. WITH A SIGNATURE SPECIMEN

Retirement Type (Check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> A Regular Survivor | <input type="checkbox"/> M Disability Survivor | <input type="checkbox"/> COLA Beneficiary |
| <input type="checkbox"/> L Disability Retiree | <input type="checkbox"/> R Regular Retiree | <input type="checkbox"/> COLA Awardee |

PLEASE PRINT

Name:		Social Security No:	
Current Telephone No:		New Telephone No:	
Old Mailing Address:		New Mailing Address:	
Date:	Signature:		Effective Date: