

Date: _____

Ms. Peggy Korzen, Executive Director
City of Grand Rapids General Retirement System
233 E Fulton St, Suite 216
Grand Rapids, MI 49503-3261

Dear Ms. Korzen:

Please update your records with my new address effective immediately. This change is
(please check one): ___Permanent ___Temporary *

Name: _____

Address: _____

Phone: _____

Signed: _____

SSN (last 4 digits): XXX-XX- _____

*NOTE: This office must also be notified in writing upon your return to your permanent address.

FOR OFFICE USE ONLY

.....
Access database change date _____

Northern Trust change date _____ Approved by _____ Date _____

Scan Date _____ Email to Insurance Services Date _____

W4-P Mail Date _____