

## Change of Address, Phone Number and/or Emergency Contact

Please print legibly and sign the completed form.

Please indicate: ☐ Change of Address/Phone Number ☐ Change of Emergency Contact

Last Name		First Name		M.I.	Employee No.
Address Of Residence					Apt #
City	County	State	ZIP Code	Telephone # (Required) (      )	

**Note: If Mailing Address Is Different, Address Of Residence Is Also Required.**

Mailing Address			Apt #
City		State	ZIP Code

Name Of Emergency Contact (Required)		Telephone # (      )	
Address	City	State	ZIP Code
Relationship			

☐ Check here if you are a participant in the Money Purchase Pension Plan

Employee Signature	Date
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**Note:** Forward original form and substantiating documents to:  
Personnel Records, Mail Code 1159  
Jamaica Station, Jamaica, NY 11435  
Fax: (718) 558-7945

**You Should Notify The Following People Of Your Change:**

1. Your Department
2. Your Union
3. Railroad Retirement Board, in writing. Include your name, new address and social security number.  
Send to: Railroad Retirement Board, 1400 Old Country Rd, Room 202, Westbury, NY 11590