FULTON COUNTY SCHOOLS EMPLOYEES' PENSION
6201 Powers Ferry Road ● Atlanta, GA 30339 ● Phone (470) 254-0102 ● Fax (866) 500-9747

Address Change Form

To Be Completed by Member -- please print clearly or type all information.

Member Social Security Number

Last Name | First Name | M.I

Previous Address

Your Previous Information
Please print clearly or type all personal information.

Address

City | State | Zip Code

Phone Number | Personal Email Address

Current Address

Your Information
Please print clearly or type all personal information

Address

City | State | Zip Code

Phone Number | Personal Email Address

Your Signature

I certify that the information contained in this document has been filled out by myself and that the changes made will be effective on the date this form is received in Pension Services and revokes any prior information on file.

Signature | Date

Before mailing this form, please be sure to:

- Fill out completely. Incomplete forms will be returned to you and not processed.
- Sign and date the form.
- Your records will be updated when the correct, completed form is received in Pension Services.
- Completing this form revokes any prior information on file.